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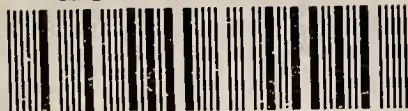
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# A TREATISE

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**A TREATISE**  
 ON THE  
**NATURE AND CURE**  
 OF  
**GOUT AND GRAVEL,**  
 WITH  
 GENERAL OBSERVATIONS  
 ON  
*Morbid States of the Digestive Organs;*  
 AND  
 ON REGIMEN.

~~~~~  
 BY CHARLES SCUDAMORE, M.D.

*Member of the Royal College of Physicians in London; Honorary Member of Trinity College, Dublin; of the Medico-Chirurgical Society of Edinburgh; of the Medical Society of Paris; Member of the Medico-Chirurgical Society of London; Physician in Ordinary to His Royal Highness the Prince Leopold of Saxe Coburg, &c. &c.*

~~~~~  
 Principiis obsta; sero medicina paratur,  
 Cum mala per longas invaluere moras. OVID.

==  
 THE FOURTH EDITION,  
 REVISED AND ENLARGED.

~~~~~  
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TO  
**MATTHEW BAILLIE, M. D.**

FELLOW OF THE ROYAL COLLEGE OF PHYSICIANS,  
F. R. S. of Lond. & Edin. &c. &c. &c.

---

DEAR SIR,

*As a testimony of that esteem and respect, which your professional and private character equally inspire, permit me the honour of inscribing to you the following pages.*

*The former editions of this work having met with a flattering reception, and a new one being now demanded, I am afforded the satisfaction of renewing towards you the expression of those sentiments which I must ever entertain; and of again exerting my best endeavours to improve the principles of the healing art, as connected with the important subjects of the present Treatise.*

*That you may long continue to promote the cause of Science and Humanity, by your valuable labours and bright example, is the constant and sincere wish of,*

DEAR SIR,

*Your obliged*

*and faithful Servant,*

**CHARLES SCUDAMORE.**

6, Wimpole Street,  
July 12, 1823.





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# PREFACE

*TO THE FIRST EDITION.*



ALTHOUGH the subject of Gout has engaged the attention of Authors from the earliest records of Medicine, there are few diseases which have remained more enveloped in doubtful theory ; or in which, the practice has been so unsettled and involved in prejudice.

It may indeed be affirmed, that the Gout has at all times been a favourite object for the exercise of Empiricism ; and every day's observation demonstrates, that, whilst the impositions of quackery are received by gouty persons with the fondest credulity, the art of regular medicine is treated

with indifference, or even rejected: so powerfully does an unknown agent affect the imagination, and indispose the mind to the exercise of the more sober faculty of judgment.

How irrational, in principle, the employment of empirical remedies really is, may in a few words be pointed out. Even the occasional success of a nostrum is injurious in its consequences, from the numerous misapplications to which such success gives rise; and, in this way, the more popular its character, the more extensive is the evil.

In a medicine even of known composition and properties, when administered as a remedy for the same disease in different persons, we see the action so much modified by individual constitution, that in one instance it aggravates the symptoms, as much as in another it gives relief. How much more indefinite and hazardous must be the application of a medicine, which is offered as a remedy for almost every kind of disease, and indiscriminately adopted in every kind of constitution! If any active powers belong to such a medicine, its inappropriate employment must produce occasional



injury ; if it be inert in its properties, it becomes a strong negative source of harm, by excluding other means which might be beneficial.

It is now to be asked, in what degree has the reproach which has fallen on the Medical Art, with regard to Gout, been really deserved ?

A large class of gouty subjects surrender themselves wholly to empirical treatment. Another portion, and probably not the smallest, prefer their *seeming* security in exercising the difficult philosophy of *patience and flannel*. They do this, either because they distrust the efficacy of remedies ; or because they labour under the infatuation, that the gout is a certain remedy for other evils ; and should rather be invited than forbidden, in its approach and stay. The observation of the late experienced Dr. Heberden is still applicable to the present question. “ But as the supposed hazard of curing the gout is now the general belief, it seems reasonable that it should not be made the opprobrium of the art of healing, till the patients will conquer their fears, and allow that it ought to be cured. Happy, however, would it be for man-

kind, if the difficulty of curing the gout were to become as little as the danger of it\*.”

The greater number of authors upon Gout, from the earliest period to the present, have adopted a species of empiricism, in founding their whole rule of practice on some imaginary hypothesis of a *proximate cause*. Nor can the regular physician be entirely acquitted of having lent his sanction to empirical remedies. In proof of this, I may advert to the medical patronage at first so freely bestowed on the *Eau Medicinale*. Its magic powers of ease were very naturally hailed with delight by the suffering patient ; and Gout no longer appeared a disease of difficult management, or a source of terror. The sequel, however, has shewn the fallacy of the charm ; and has served to illustrate the fact, that the best remedies are not those which hastily produce a palliative and transient relief : but, on the contrary, such as are administered upon sound general principles ; are carefully adapted to the variations of every particular case and consti-

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\* Commentaries, p. 47. — “ It is not a sacred disease : There will be no profaneness in handling it freely.” — *Rush*.

tution ; and are pursued with steadiness and perseverance.

It must, I fear, be allowed, that the regular treatment of Gout has been considerably neglected by the Profession. It appears to have been less an object of attention than any other disease of equal importance ; and it is usually pronounced by all parties to be intractable in its nature, and but little understood. In this reflection, however, I do not overlook the several modes of active practice which have at different times been proposed within these few years. Yet it has always appeared to me, that the views which have been formed of the nature and cure of Gout, have been too partial ; and deficient in attention to that code of general principles, which is essential to the true understanding and treatment of every disease.

Upon this conviction I was led to the present undertaking. I am well aware how imperfectly I have supplied the deficiency of which I complain ; but I shall have performed no useless task, if it should appear that I have entered into the right path of investigation ; and have succeeded in mak-



ing some advances towards a clear and comprehensive illustration of the subject.

In the tabular arrangement which is annexed to this Treatise, I have detailed the *analytical* method of examination, which I have adopted in the study of the cases which have come under my care, and within my immediate information. From the method itself I have derived great facility of arranging my facts, and establishing my conclusions; and it is after no inconsiderable exercise of observation and reflection, that I venture to present these pages to the public.

On these grounds I feel myself entitled to advance the following general positions:

That the Gout is a disease not only injurious to the constitution, but destructive of the organization of the particular textures which it affects; and, by such united influence, tends both to shorten and embitter life:

That it is as completely within the useful influence of Medicine as any other severe disease:

That the fit may be immediately relieved in its painful symptoms, and materially shortened in its duration :

That most of its natural bad consequences may, by timely care, be prevented ; and, finally,

That all these advantages may be afforded by means, which, in removing the disease, tend at the same time to restore the constitution.

The security of the patient from future attack, is a question of separate consideration. It is true that it depends much on the Medical Treatment which is pursued in the paroxysm, and during the period of convalescence ; but it is still more connected with the patient's own peculiar care. The gouty diathesis being established in the constitution, it is excited into action by many remote causes ; and, certainly, of the chronic diseases, this appears to be influenced by a greater variety of hurtful agents than any other. Hence, without a corresponding observance of regimen, and general care, the gout, ere long, returns. In this case it will probably happen that the treatment which

was successful in the paroxysm, however judicious it may have been, is regarded as of little value ; or is even accused as being the source of disappointment.

The *prophylactic* means, indeed, deserve the most serious and attentive consideration in every individual case. In no disease, however, can the skill of the Physician be proof against a want of care in the general habits of the patient ; and those who are not their own Physician in this respect, have no right to censure the advice which they but imperfectly follow.

Upon the subject of *Rheumatism*, I have, on the present occasion, confined myself within narrow limits ; and the practical consideration of the chronic species of this disease, I have entirely reserved as matter for a future volume.

I have long conceived that some useful light might be thrown on the phenomena of Rheumatism, both in relation to its theory and treatment, by attempting a more accurate principle of classification than has yet been laid down by authors ;



and by employing that analytical method of inquiry, which unfolds to our view all the various causes and phenomena, both local and constitutional, which can be discovered in any way to influence, or to be connected with, the disease.

The illustrious Sydenham remarks, “ The improvement of Physic, in my opinion, depends upon collecting as genuine and natural a description, or history of all diseases, as can be procured ; and laying down a fixed and complete method of cure.”





# PREFACE

## *TO THE SECOND EDITION.*

~~~~~

AN early demand for the first impression of a work, is one of the most satisfactory proofs which an author can receive, that his labours have neither been altogether devoid of interest, nor exerted in vain.

Under the influence of this consideration, I have carefully endeavoured to render the present edition more copious and useful than the former. For this purpose, I have attentively revised the opinions before advanced; I have again studied the cases from which I had drawn my conclusions; and have also added a detail of all those results and observations, which a progressive experience and more mature reflection have since afforded.

Convinced of the real and extensive benefits, which are to be derived from a scientific and patient



cultivation of the healing art, I have strenuously opposed every innovation of empiricism and empirical principles ; and have endeavoured to shew, that it is only by a steady and unremitting observation of natural phenomena, that the philosophy of medicine can be established on a firm basis ; and the profession itself be elevated to its proper dignity and rank.

Between the diseases *Gout*, *Gravel*, and *Rheumatism*, there are so many points of natural affinity, that they have appeared to me to form a very suitable class of objects to be embraced in the design of the same work.

In the Treatise upon Rheumatism, which I have still offered in a limited manner, as compared with the extent of the subject, I have, in my introductory observations, entered into an apology for its brevity, which I hope will be found satisfactory.

In advancing many critical objections to the opinions and experiments of other authors, I trust that I shall not be found guilty of injustice or want of candour. I have used only that freedom to-

wards them, which I desire and invite towards myself.

In the formation of every science, the collision of ideas, and comparative observations, invariably tend to elicit information and establish truth.

In an art like that of practical medicine, which, under the most favourable circumstances, is difficult, and often deceptive, the distrust of received opinions and high authorities is calculated to lead to the discovery of new and useful facts; and to render the researches of genius and wisdom more firm in their foundation. A passive contentment with what has already been accomplished, would at once tend to narrow the avenues of science; to arrest the progress of improvement; and to present a strong barrier to the advancement of human knowledge.

The mere desire of novelty is an unworthy passion; but that spirit of inquiring scepticism, which urges the mind to examine with strict scrutiny the present records of science, I hold to be the very spring of action towards all improvement.

How, unless in this manner, could the chaff be winnowed from the grain? How could the illusions of false or mistaken philosophy be dispersed, and made to yield their place to the substantial forms of truth?

Impressed with these ideas, and at the same time desirous to cherish a due respect for the opinions of others, I must agree in the sentiments of Pliny, when he says,

“ Quamvis enim cedere auctoritati debeam, rectius tamen arbitror, in tanta re, ratione quam auctoritate superari.”

Lib. i. Ep. 20.



# PREFACE

## *TO THE THIRD EDITION.*



THE additions to the present Treatise are so numerous, and so much interspersed throughout the work, that I have found it impossible to embody them into an Appendix, as I should have been gratified in doing, for the convenience of those who may have purchased either of the former editions. But should another at a future period be required, I fully purpose to publish the work in two volumes, confining the subject of Gout entirely to the first; and to print a certain number of additional copies of the second volume, for the accommodation which I have stated.

The edition now offered to the public, will be found to contain nearly one third proportion of matter more than the last. The additions consist almost wholly of practical observations and cases; together with a Series of Experiments, chiefly relating to the examination of those gout nostrums

which have so long engaged the curiosity of the public, and still give occasion to doubt and discussion, both as to the nature of their properties, and the propriety of their administration. Upon the subjects of Gravel and Rheumatism, I have enlarged as far as my limits would permit; and have endeavoured to furnish some useful materials, although professedly very incomplete.

With respect to the Experiments, notwithstanding that I have already introduced them with some prefatory observations, I shall beg leave in this place also to say a few words. It was at first my intention to have printed the details separately from the Treatise, and to have offered them to the sole attention of the Medical Reader; but, on mature reflection, I considered that they might prove both interesting and useful to the gouty patient, as furnishing some important hints respecting the immediate treatment of his disorder. The recital of animal sufferings, inflicted in the way of experiment, certainly in itself requires some apology; and I should willingly have considered the delicacy and feelings of the general reader, in suppressing many particulars; but as constantly as

I attempted this, I found that I materially diminished the information which I had to offer ; and that I could not so satisfactorily shew the grounds of my own conviction, as to the hurtful consequences of employing these medicines, and the importance of deterring gouty persons from resorting to them.

The results of these Experiments have proved a great source of instruction to myself ; and I will appeal to every one, whether it is not allowable that a medicine of doubtful character should be made to shew its deleterious agency on animals ; if, from such means, any decided advantage can be derived to the health and comfort of our fellow creatures.

The high sanction which the use of these pretended specifics has so long received, demanded from me every collateral evidence to support the opposite opinions which I have ventured to maintain. The point for which I most earnestly contend, is, that the administration of gout nostrums, in addition to any hurtful agency which they possess, involves in the treatment completely false principles. It

constitutes a practice essentially unsound. If, therefore, my views be just, and I gain the concurrence of the rational and well informed ;—if I assist in establishing a proper and regular mode of treatment for the gout, and thus lessen the amount of human suffering ;—and, finally, if I oppose with success the unworthy claims of empiricism, and gain new adherents to the cause of scientific medicine ; I shall be contented with my labours, and reflect with satisfaction on their result.

Should the doctrines and opinions which I have advanced be founded in truth, they will stand the test of time and opposition ;—if, on the other hand, they originate in error, they must, when submitted to the same ordeal, as inevitably fall.



# PREFACE

## *TO THE FOURTH EDITION.*



SINCE I first offered my opinions to the Public, on the Nature and Treatment of Gout, a sufficient interval of time has elapsed to enable me to form some conclusive judgment of their error or their truth. It is with much satisfaction therefore that I now renew, with increased confidence, my former assurance of the success of my principles of practice; and this assurance I most conscientiously make, as founded entirely on my extended experience. I affirm indeed that no disease, attended with equal suffering, and altogether of equal importance, admits of such certain relief from medical treatment, as the Gout; whether in reference to the mitigation of the present symptoms, or to the permanent benefit of the constitution.

The industry of legitimate criticism, either as it may arise from the pure feelings of an honourable regard for the interests of literature, or from less worthy motives, is useful to the public, both by deterring

an author from advancing hasty and immature opinions ; and by deciding the claims of individual writers. But widely different is the influence produced by the illiberality of petty criticism, and the wretched labours of calumny and detraction.

It is a question probably asked, what claims to originality do I possess in the treatment of Gout ; since the colchicum is one of my favourite remedies. I believe that I have been accused of inconsistency in condemning the use of this medicine, while at the same time I employ it. In justice to myself therefore, it appears to me necessary that I should enter into some explanation.

In regard to the colchicum, I confine myself to the use of that preparation which is incomparably the most mild. To make myself easily understood by the general reader, I may state that, in my opinion, there is as much difference in the comparative activity of the acetum colchici and the extract obtained from it, and the other forms of colchicum, as between that of the pilula hydrargyri, or what in popular language is called the blue pill, and the stronger preparations of mercury ;

although the active and the mild compounds equally come under the denomination of mercury. In addition also to my making the selection of this mild preparation of colchicum, I employ it only in combination with, and as an auxiliary to the agency of other medicines; having a higher object in view than the mere dismissal of the present symptoms. It appears to be the intention of those who prescribe the gout specifics, as they are termed, to subdue the painful gouty action in the shortest possible time, avoiding the use of evacuants, lest the desired influence of the specific should be taken away. Whether the medicine so administered be the eau medicinale, Wilson's tincture, Reynolds's specific, or the tincture or wine of colchicum, I contend that the error in principle is the same. Experience clearly proves, that in most instances a temporary relief only of the symptoms, and not any permanent advantage, can be effected on such terms. In theory it would not seem probable that a disease of wrong functions in the abdominal viscera, slowly produced, should yield its hold to the prompt agency of any individual medicine. I will further argue that such practice is not only unskilful from its being so superficial in principle,



but that it is positively injurious, by tending to impair the tone of the digestive organs ; to weaken the nervous system ; to suppress the gout rather than remedy the cause ; and to produce debility of the extremities. I am convinced that the proper treatment of the Gout consists in a comprehensive employment of internal and external means, calculated to meet all the circumstances of the disease ; and I do assert that the fit combination of remedies, applied at an early period, and followed by due care in diet and general management, will prevent such a consequence from the disease as crippled limbs ; and will also preserve the constitution free from all serious inconvenience.

I have endeavoured to make this volume more acceptable than the former, by revising the whole, and introducing a large portion of new matter, entirely of a practical nature.

I hope to fulfil my intention of preparing another volume, which may embrace the subject of Rheumatism in all its forms ; and of Neuralgia, or painful affection of Nerves.





# A TREATISE,

&c. &c. &c.



A CLEAR arrangement and exposition of the principles of a science, essentially conduce to establish correct views with regard to its theory, and to facilitate its practical applications. This is more especially the case with regard to pathology and the practice of medicine ; and I trust, therefore, that no apology will be necessary for the extent of preliminary matter which the following pages may embrace.

I feel it, in the first place, incumbent on me to state the grounds on which I have ventured to propose a different nosological arrangement in my description of Gout, from that which was laid down by Dr. Cullen.

This author, who, on the subject of nosology, continues to be the standard authority in the British schools of medicine, has drawn his general characters and varieties of this disease as follows :

“ *Podagra*.—*Morbus hæreditarius, oriens sine causa externa evidente, sed præeunte plerumque ventriculi*

affectione insolita; pyrexia; dolor ad articulum, et plerumque pedis pollicis, certe pedum et manuum juncturis, potissimum infestus; per intervalla revertens, et sæpe cum ventriculi, vel aliarum internarum partium, affectionibus alternans.

“ *Varietas 1<sup>ma</sup>.* Podagra (*regularis*) cum inflammatione artuum satis vehementi, per aliquot dies perstante, et paulatim, cum tumore, pruritu, et desquamatione partis, recedente.

“ *Var. 2<sup>da</sup>.* Podagra (*atonica*) cum ventriculi, vel alius partis internæ atonia, et vel sine expectata aut solita artuum inflammatione, vel cum doloribus artuum lenibus tantum et fugacibus, et cum dyspepsia vel aliis atoniæ symptomatis, subito sæpe alternantibus.

“ *Var. 3<sup>tia</sup>.* Podagra (*retrograda*) cum inflammatione artuum subito recedente, et ventriculi vel alius partis internæ, atonia mox insecuta.

“ *Var. 4<sup>ta</sup>.* Podagra (*aberrans*) cum partis internæ inflammatione, vel non prægressa, vel prægressa et subito recedente, inflammatione artuum.”

I shall offer my comments briefly in the order of the quotations (which will be translated from the preceding original text of the author), passing over those parts, the correctness of which, as general statements, I admit; and reserving further, and more extended observations for the respective heads of the subject in the course of this work.

*An hereditary disease.*—As the gout is so frequently found to occur where no hereditary influence can be referred, this circumstance is erroneously stated as a definite character of the complaint. Also in many of the

worst examples of gout which have come under my observation, there has not been a trace of the disease in the family.

*Arising without any evident cause.*—This is obviously expressed by Dr. Cullen as a distinguishing character from rheumatism, which he begins with defining, “a disease from an external and often an evident cause.” Although the gout is a disease arising out of the internal faults of the system, and does not, like rheumatism, originate as a *local disease* of structure externally excited, yet its two-fold character in this respect must not be overlooked.

The gout is often called into action, even in the first fit, by a cause equally external and evident as that which leads to rheumatism; namely, by vicissitude of temperature: also by a sprain; contusion; or any kind of local injury, which in a person not disposed to gout, would produce only common inflammation, or some other kind of inflammation or diseased action, according to the specific constitutional disposition of the individual.

*Fever.*—As a general position, fever is correctly stated to be a character in the gouty paroxysm: although it is not invariably an attendant; and indeed may be said to exist only when the action of the heart sympathises with local inflammation and pain, or when the influence of some remote cause has induced the inflammatory diathesis.

*Pain at a joint, and, for the most part, the great toe, certainly most strongly affecting the joints of the feet and hands.*—This implies too strongly that a joint is the only seat of true gout. I admit that, if the foot be the part attacked, the description is, commonly, just; and, also



that, in the majority of examples, the gout chooses the foot in its first attack, and that the ball or first joint of the great toe is the particular part affected. It is in the commencement of the disease that this circumstance is most remarkable; but even in a first attack, it sometimes happens that the inflammation fixes on the tendinous parts of the foot and hand; and in subsequent attacks especially, so many other situations remote from the feet and hands, and not only the articular structure, but tendons and bursæ also, are affected in an equally characteristic manner;—I mean equally serving to constitute the disease as gout—that the definition, putting false limits to the external indications, is calculated to mislead, and therefore is exceptionable. Hence also, *podagra*, (from *πους*, a foot, and *αργα*, a seizure) which Cullen\*, in imitation of Boerhaave, chose as the title of the disease, is too confined in its expression. *Arthritis* (from *αρθρον*, a joint), for the reason just now stated, is not an accurate term, but deserves to be retained in preference; for the gout, if not situated at a joint, chiefly affects those textures which are more or less subservient in function to the joints.

*And often alternating with affections of the stomach, or of other internal parts.*—I presume that this passage expresses, that there is frequently much mutual sympathy between the stomach, or some other internal part, and the external seat of complaint; so that when the stomach, for example, is affected with pain, spasm, coldness, nausea, or other uneasy sensation, the occurrence

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\* *Arthritis nomen, utpote apud medicos ambiguum, rejeci, et Podagra nomine, utpote typum morbi præcipuum notante cum celebri Boërhaavio usus sum.*—*Synop. Nos. Method. Cullen.*



of external inflammation and pains, often will produce internal relief; and, in a certain degree, the converse of this may take place: but if the idea be extended to the signification of *alternation* in the inflammatory action, it denotes a change of action which must tend to danger of life; and therefore is an expression not appropriate to a general description of gout.

The sympathetic action which Dr. Cullen appears to describe, relates rather to the passive form of gout (which hereafter I shall denominate *chronic*), in which the external inflammation is slight and wandering, and external pains reciprocate with many internal sympathies. This definition accords in part with his *atonic variety*.

## OF THE VARIETIES.

*Variety 1. Gout (regular).*—The fundamental distinctions which Dr. Cullen adopts, of *regular* and *irregular* gout, convey, on the one hand, more precision of definition, than the various modifications which the disease assumes, seem to admit; and, on the other, allow more looseness and latitude of application, than is compatible with good practice.

An attack of gout is not essentially the less regular, because it seizes some other part not immediately belonging to a joint; or appears in some other situation instead of the foot and hand; or because it proves of long duration, and changes frequently its seat. The following statement also is deficient in accuracy, and appears to me exceptionable as a definition. *With a sufficiently strong inflammation continuing for several days, and gradually receding with tumour, itching, and desquamation of the part.*

The time of duration here mentioned belongs almost only to the first fit; and in regard even to this, much exception prevails. The *swelling* is not deferred till the inflammation has gradually receded; but usually takes place in the course of twenty-four hours, and is rarely delayed beyond forty-eight. The *itching*, as being the last and least remaining irritation of nerve, and also incidental to a scurfy state of the skin, is an ordinary occurrence; but the desquamation of the part is by no means sufficiently frequent to serve as a strictly characteristic description.

*Variety 2. Atonic.*—*With an atony of the stomach or other internal part, and either without the expected or usual inflammation of the joints, or with only slight and transient pains in the joints, and often suddenly alternating with dyspepsia or other symptoms of atony.* The first part of this definition is descriptive only of the dyspepsia, or other internal derangements, which may take place in the gouty individual as a common occurrence, and without being necessarily dependant on that state of the system which tends to gout. The latter part describes the passive or chronic form of the disease.

*Variety 3. Retrocedent.*—*With inflammation of the joints suddenly receding, and quickly followed by atony of the stomach, or some other internal part.* I am fully convinced, that inflammation, having even a fatal tendency, is a more frequent consequence of retrocedent gout than atony; and this definition therefore is of great practical importance. In several cases which have come under my own treatment, and which were produced by exposure to wet and cold, very painful inflammatory symptoms affecting the abdominal viscera took place, requiring the prompt and free employment of the lancet.



I do not deny that in debilitated persons, in whom the circulation is weak, the local gouty action may suddenly, and from slight causes, be exchanged for an internal attack of a spasmodic nature; but such a case, I should consider as an exception to the more usual effects of true retrocedent gout; and I am persuaded that we should be very cautious in drawing the conclusion, that *atony* is the internal affection, succeeding to the suspension of that which is external.

*Variety 4. Misplaced.*—*With inflammation of some internal part, inflammation of the joints either having not preceded, or having preceded, and quickly disappeared.* This definition begins with direct reference to the occurrence of any of the phlegmasiæ in a gouty individual, whether the disposition to the paroxysm exist at the time or not. It concludes with a repetition of what was before said of the retrocedent variety, with the difference, that the new internal action is here unequivocally designated as that of inflammation.

To the term and import of *irregular* gout, I have already adverted, considering it to be like Musgrave's distinction of *anomalous*, uncertain and without limits in its application, and only calculated to preclude the possibility of accuracy either in theory or practice.

Dr. Cullen observes (Par. 518), "Whatever symptoms we can perceive to be connected with, or to depend upon the disposition, which produces the inflammatory affection of the joints, but without its taking place, or being present at the same time, we name the *irregular gout*."

I grant, and even contend, that the disease possesses a complex character; and that it consists of an external local action, which is the offspring of constitutional causes; so that, if it were true that we could point out

any one particular state of the system, as the invariable circumstance either antecedent to the local action which we call the gout; or, co-existing with it, in the clear relation of cause and effect; we might, on the occurrence of such a state of the system, without its being followed by the usual external characters, very justly assert it to be an attack of irregular or anomalous gout. We cannot however boast, that our knowledge of the intimate nature of the disease is sufficient to authorise such conclusions. It should be considered, that gouty persons are not exempted from other diseases; nor are the various morbid sympathies which they suffer internally, of a peculiar or specific nature. It appears to me manifest, that the familiar employment of these terms, *irregular* and *anomalous*, gives an unbounded latitude to call every disease\*, and every morbid sympathy occurring in a gouty individual, a *disguised gout*.

This consideration is of more importance than may at first sight appear. I do not take up the argument for the sake of verbal dispute. A name being so readily found for an obscure disease, the practitioner considers himself as excused from the difficult task of nicer discrimination. He probably directs his treatment according to some prejudiced views of the nature of gout, instead of taking his indications from an attentive investigation, founded on anatomical knowledge, physiological reasoning, and sound pathology. In other words, he treats the disease according to what *it is not*, rather than according to what *it is*. The *patient*, influenced only by the suggestions of his fears, anxiously desires to fix the wander-

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\* In proof of this opinion, I refer the reader to Musgrave de Arthridite Anomale, and to Par. 518, 519, 520, Cullen's First Lines: also, to the French authors on Gout.



ing gout, as he pronounces it, in his extremities; and with this view, drinks brandy or madeira. From the depression which he occasionally feels, he seeks the false relief procured by stimulating cordials; and produces a state of intoxicating excitement, at the expense of positive injury to his constitution.

The circulation, when excited by heating cordials, may be urged to relieve itself by that kind of inflammation to which there is the principal tendency in the constitution; and, what may be regarded as a fortunate event under such a mode of proceeding, the gout may take place; but, in the mean time, apoplexy, or some other evil much worse than the gout, so earnestly invited, may be produced.

I acknowledge that dyspepsia, and any other chronic affection, and even acute diseases, may receive considerable modifications of character from the influence of a gouty habit, or even from the remote tendency to gout; and that some correspondent modification of treatment may then be required; but this admission is rather general than particular, and forms a part of this medical rule, that our principles and practice should always be applied and varied, in correspondence with the character of the individual constitution and habit.

Finally, in regard to any disease in a gouty person, whether simple or anomalous, I should adhere to the ordinary nomenclature (if a name were desired); taking into consideration any probable influence which the arthritic temperament and constitution might exert.

Dr. Cullen has combatted the doctrine of a morbid matter with much ability and ingenuity; but he is not himself very satisfactory in the following piece of pathology, Par. 533: "In some persons there is a certain vigorous and plethoric state of the system, which, at a

certain period of life, is liable to a loss of tone in the extremities. This is, in some measure, communicated to the whole system, but appears more especially in the functions of the stomach. When this loss of tone occurs while the energy of the brain still retains its vigour, the *vis medicatrix naturæ* is excited to restore the tone of the parts, and accomplishes it by exciting an inflammatory affection in some part of the extremities. When this has subsisted for some days, the tone of the extremities and of the whole system is restored, and the patient returns to his ordinary state of health."

The loss of tone in the extremities, which is here described as the first link in the chain of the phenomena, is rather fancifully conceived. The system, though in a plethoric state, can scarcely be said to be vigorous. The reflection of the loss of tone from the extremities to the internal functions; the impulse given to the *vis medicatrix naturæ*; and the consequent restoration of the general and local tone by means of the inflammation excited; compose a mass of doctrine, in which, a variety of hypotheses are confusedly blended together, and are calculated to perplex and mislead the judgment.

From the foregoing theory, Dr. Cullen appears to have deduced all his practical views.

*Sauvages* has given a very complicated arrangement on the subject of gout, creating many distinct species from the modifications which the disease occasionally assumes, by combination with other diseases, or by the influence of the season of the year\*. The Greeks distinguished the varieties of gout according to situation; as, podagra in the feet; chiragra in the hands; pechya-

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\* Arthritis asthmatica, rheumatica, æstiva, hyemalis, &c. &c.  
—*Sauvages' Nosol. Method.*



gra in the elbow; gonagra in the knee; dentagra in the teeth; cleisagra in the articulations of the clavicles; omagra in the articulations of the humerus; rachisagra in the spine of the back; and tenontagra in the large tendons\*. These terms descended to the Latins, and were indiscriminately applied to gout and rheumatism. Indeed when we consider, that until the time of Ballonius†, rheumatism does not appear to have been considered as a distinct disease from gout, we should surely, on all occasions, receive the authority of the ancients upon the treatment of gout with much circumspection.

*Boerhaave* is said not to have introduced the mention of rheumatism in his first course of lectures; but he was afterwards made too well acquainted with it, from becoming himself the subject of the disease.

*Sydenham*, in 1683, may probably be considered as the first author who wrote with much perspicuity on gout and rheumatism; but I cannot help thinking of this eminent man, that although, as an author, he possessed great originality and exceeding merit, and appears in himself to have been the model of a virtuous physician; yet his doctrines upon gout, which were conceived in the full force of the humoral pathology, have had, even to the present day, a most injurious influence on practice.

The antiquity of the notion concerning the humoral nature of gout, is illustrated by the etymology of its name—*gutta*, a drop‡; signifying, it is said, that the dis-

\* *Coelius Aurelianus*, Lib. v. cap. 2.

† *De Rheumatismo et Pleuritide Dorsali*. Paris, 1642.

‡ “*Gutta dicitur, ex absurda veterum hypothese, qua ab humoris cujusdam stillicidio, in articulos facti, eum dolorem oriri putabant.*”—*Sauvages' Nosol. Method*, vol. ii, p. 19.



ease was caused by the dropping of some humour into the joints.

It may be remarked of the nomenclature of the ancients, that it was always expressive, though often erroneous. The examination of medical etymology through its whole extent, would be a curious and interesting branch of inquiry. I shall not, however, pursue this digression any further, but proceed to the more immediate consideration of my subject.

It appears to me, that in nosological divisions, a degree of refinement is sometimes introduced, which rather perplexes than informs the practitioner. In medicine, more than in any other art, it is dangerous to frame distinctions without a difference. With this conviction, and with a persuasion that nicer separations are as useless as they are difficult, I shall be contented to divide gout into *acute*, *chronic*\*, and *retrocedent*; considering the acute form of the disease, without regard to particular situation, as the first variety; the chronic, as the second; and the retrocedent, as the third. In an attempt to mark the general characters of gout, I feel the necessity of entering

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\* Dr. Latham, in speaking of the usual denomination of the varieties of gout, thinks that "they might more properly be distinguished like rheumatism, into the acute and chronic."—*Letter on Rheumatism and Gout*, 1796.

Dr. Hamilton makes the following observation: "Perhaps it may be more simple to divide this disease in two kinds only, the *acute* and the *chronic* gout; because, agreeably to the different phenomena, the several gradations, if I may so term them, between the highly inflammatory acute state of it and the lowest debilitated chronic state, the two extremes of the disease, involving all the irregularities of it, may be readily comprehended."—*Letters on Gout*, 1806, p. 70.

into a description rather in detail, instead of confining myself to a brief definition; because the disease is too complex in its nature, to be distinguished with certainty by a few signs alone.

## GOUT.

A constitutional disease, producing an external local inflammation of a specific kind; the susceptibility to it often depending on hereditary bodily conformation and constitution, but in many instances wholly acquired; very rarely occurring before the age of puberty, not frequently under the age of five-and-twenty, and most commonly between the ages of twenty-five and forty; affecting chiefly the male sex, and particularly, persons of capacious chest and plethoric habit; in the first attack, invading usually one foot only, and most frequently at the first joint of the great toe; but in its returns, affecting both feet, or other situations, as the knees, hands, and elbows; and not only in the articular structure, but also in the other textures belonging to the moving powers, different parts being affected together, or in succession; often accompanied with sympathetic inflammatory fever, which is usually marked by nocturnal exacerbations and morning remissions; much disposed to return at periodical intervals, and for the most part preceded by some premonitory symptoms.

## ACUTE GOUT.

Inflammation and pain of the articular, tendinous, or bursal structures, usually attacking one part only at the

same time ; but in succession of attack, affecting different parts together ; with preternatural fulness of the adjacent veins, and, in certain situations, with œdematous swelling of the integuments occurring in twenty-four or forty-eight hours from the invasion of the fit ; vivid redness of surface, which is sometimes shining ; entire disability of the affected part, with peculiar sensations of burning, throbbing, cutting and pricking, and weight : the action sometimes readily changing situations spontaneously, or from slight causes ; terminating almost invariably without suppuration, and usually with some critical indications of the event.

### CHRONIC GOUT.

Inflammation and pain more slight, irregular, and wandering, than in the acute ; faint redness of surface, or without any change of the natural complexion ; much permanent distension of parts, or continued œdema, with impaired moving power ; usually no critical indications of its terminating ; more or less associated with a morbid state of the digestive organs, a languid or oppressed circulation, and much nervous irritation in the system.

### RETROCEDENT GOUT.

Metastasis, or transference of the gouty action, during the state either of acute or chronic gout, from the external part, to some internal organ.



## HISTORY OF ACUTE GOUT.

IN some individuals I have traced that a gradual increase of abdominal corpulency, attended with an inert state of bowels, a scanty secretion of urine, and uncomfortable sensations of a fulness of the general habit, has been imperceptibly introductory to the attack. On the other hand it occasionally happens, and especially in the first fit, that the immediate invasion of the disease is not preceded by any warning; but the patient, after going to bed with the ordinary feelings of health, is surprised in the night with the first symptoms of the disease; yet, except in the first fit, we see much more commonly, that some preceding symptoms intimate for several days, or give even a longer notice, that the gout is at hand. Of these *premonitory* symptoms, as I have found them occur in different individuals, more or less connected with a certain attack of the disease, I may enumerate the following:—

Depression of spirits, with drowsiness and frequent yawning, night-mare, and restless sleep; heart-burn, acidity of stomach, and sometimes to the degree of rejecting acid matter; flatulence; hiccup, which is with some so urgent, as almost to amount to a spasm of the stomach, as expressed in the language of the patient; irregular appetite, with oppression after a meal; a frequent sense of coldness and soreness at the epigastric region; general itching of the skin; costive bowels; or, more rarely an irritable state of the canal, amounting to diarrhœa; scanty and deep-coloured urine, becoming turbid in cooling; or, in opposition to this, it is sometimes copious and pale; pricking and numbness in the lower extremities; muscular twitchings in the day, and

catchings or cramps in the upper or lower limbs, more particularly in the one which is about to be attacked, and occurring chiefly in the first attempts to sleep at night; much coldness of the legs and feet, and occasional universal chillness; or, general rigors which are even urgent. Restless nights, or unrefreshing sleep, often precede the fit. It sometimes, however, happens that the patient feels certain of an approaching fit, from the circumstance of sleeping with unusual profoundness, for one or more nights in succession. Some complain of universal feverish sensations, having, with coldness of the extremities, heat of the head with flying pains, vertigo, and frequent flushings. In the disturbed functions of the stomach, an irritability which amounts to occasional retchings, sometimes takes place. An excessive appetite for one or more days before the fit, is not unusual; but this is attended with occasional heart-burn and nausea. One patient, informs me, that for a week before the attack his appetite cannot be satisfied. To use his own words, "he could eat all day long." Another also describes this precursory symptom in the same degree, with the addition of having an excessive secretion of saliva. I have seen a gouty person suffer this latter symptom to the degree of active ptyalism, as if under the strong influence of mercury, increasing with the symptoms of the paroxysm; and he states that this always happens with a fit, in its first stage.

The nervous system is often apprised of the approaching gout by previous general lassitude, with much agitation of mind, palpitation of heart\*, or of the aorta, in

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\* The morbid sympathies are variously referred, and often without any apparent connection with the cause by which they are supported. I am informed by Dr. Baillie, of a gentleman who suffered palpitation at the heart for six months without relief



some part of its course, but especially in the epigastric region; tremors, and internal flutterings. Sometimes the patient going to bed with no expectation of the approaching evil, sleeps through the night, but is distressed with some horrid dream; and in the morning finds that the demon of his vision has been the gout. A gentleman, who has for many years been afflicted with gout, for a day or two before his attack, has alternate chills and flushings, is extremely nervous, and he says, without the power of restraint, sheds an abundance of tears.

A deaf patient complains that at the appearance of the fit, his infirmity is so much increased, that he cannot possibly be made to hear.

In one person, a heat of the eyes with slight membranous inflammation, is one of the usual premonitory symptoms.

A cough, with much mucous secretion in the tracheal membrane, sometimes precedes the fit: yielding when the gout becomes fixed, or occasionally continuing with the other symptoms.

This description of cough is to be distinguished entirely from the recent catarrhal cough and symptoms, which sometimes usher in a paroxysm, when exposure to wet and cold has been the exciting cause. The mucous membranes of parts which have been once affected with disease, or which are prone to disease, are much disposed to acquire a state of unhealthy action; in apparent sympathy, either with that condition of the constitution which borders on a fit of the gout; or in which, the disease is threatening its return, but does not develope itself.

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from medicine; but a fit of the gout coming on, it suddenly and entirely left him. I have met with a similar case, and which I shall more particularly describe, when treating of chronic gout.



A remarkable irritability of the bladder and urethra, with increased secretion in the mucous membrane of these parts, prevails with some persons shortly before the fit; and when the urethra is affected with stricture, these symptoms almost with certainty take place.

A gentleman who has a slight stricture, informs me, that during a few days before one of his fits of gout, he was troubled with so much ardor urinæ, dysuria, and discharge, that he persuaded himself of the reality of gonorrhœa; and sought advice accordingly. He was judiciously instructed to wait the use of any treatment for such a complaint. When the gout appeared in one foot, all the other symptoms just mentioned almost instantly left him. Sir Everard Home, in his work on Strictures, observes, "So much is the urethra in its natural state under the influence of gout, that it is sometimes affected by it on the coming on of every attack, with all the symptoms of inflammation, as pain in making water, and a purulent discharge; and as soon as the gout fixes itself in the foot, they entirely disappear." He adds, "this natural susceptibility of the urethra to be influenced by gout appears to be much increased, when that canal is in a diseased state, so as to increase all its symptoms, and when they have gone off, to produce a recurrence of them, and prevent the disease to which it is liable, from being completely removed." He offers cases in illustration of these remarks, noticing, however, that some gouty persons, even with stricture, are exempted from this peculiar irritation in connexion with the paroxysm.

I have not witnessed many examples with these complete symptoms described, unless that a stricture has existed; but, with the exception of the discharge, I have seen persons affected, in a very remarkable degree,

with inflammatory and spasmodic irritation of the urethra, shortly before the fit; and with them, this occurrence has been a sure presage of the gout which was to follow.

Sometimes the symptoms come on with the paroxysm, and in either case, whether in this manner, or precursory, most usually continue in a greater or less degree, for a few days during its height. In some instances, however, as already mentioned, the whole complaint yields at once to the gout. In other examples the complaint exists in a chronic state, proving very distressful. I shall hereafter relate some urgent cases of this description.

In addition to the local premonitory symptoms which have been mentioned, the following also occur. Unusual weakness and tenderness of joints, and more particularly in the limb threatened with immediate gout, accompanied with shootings, numbness, prickings and transient spasms; a fulness of the veins of the limb, and a dark colour of the skin in the part about to be affected with inflammation. Although some stiffness and inability in the moving powers of the joints generally precede the fit, yet I am acquainted with some exceptions, in which the patient expects a long confinement, if he has felt increased energy and alertness of limbs a day or two before his attack. There is this occasional variation also with regard to the mind. In general, the spirits are depressed for a short time before the fit; but it now and then happens that they are more than usually elevated: so curiously are diseases modified by idiosyncrasy, and by the accidental state of the constitution.

A swelling of the feet after slight exercise, with uneasy stiffness of the joints, and a dry state of the skin, with more or less of heat in the soles of the feet, may also be mentioned as precursory. One person informs me, that he

is generally warned of the approaching attack, by finding, a few days before, "that his shoes pinch him."

A sudden cessation of the usual perspiration of the feet, is also noticed by some gouty persons, just before the paroxysm.

A female patient of delicate constitution describes, that a day or two before the fit, she experiences much perspiration of the limbs, great restlessness, cramps, and startings of the legs in the early part of the night, followed by composure about five in the morning;—and she notices the veins of the extremities to be remarkably distended.

I should add as a general statement, that the most severe of the local signs which I have just enumerated, affect those only who have experienced frequent returns of the disease; and in whose limbs, more or less of disorganization of structure has been produced.

Those gouty persons who are affected with concretions (chalk-stones), experience, for a short time before the fit, pricking pains in the parts where they are situated. This is described even by those who have minute points of concretion in the lobes of the ears, and in no other part of the body. When these concretions have given rise to ulcerations in the hands or feet, the sores are unusually tender, aching, and sometimes very painful, as the fit is making its approach.

On the subject of precursors of the fit, it deserves to be remarked, that in a general inflammatory diathesis of the system, and usually from partial exposure to cold acting as the exciting cause, an internal part is sometimes *first affected* with inflammation (constituting what Dr. Cullen denominates the *misplaced* variety), either for a short time, or for some continuance; but this at once suddenly subsiding, the *gout* succeeds; apparently con-



centrating in itself all the inflammatory disposition of the system.

In two cases of pneumonia, which came under my observation, every symptom affecting the lungs immediately disappeared, on the supervention of the gout, that occurred within a few days.

In another instance, the inflammation of the lungs proceeded to its full extent, in union with the gout in both feet.

Inflammatory sore throat is not an unfrequent attendant upon acute gout, when wet and cold have excited the fit. This does not yield to the influence of gout, but requires the usual treatment.

I have met with instances of pleurisy, in which, after the employment of successful treatment by bleeding, cupping, &c. a fit of gout has immediately succeeded.

Morgagni mentions of himself, that he had suffered from an ophthalmia in each eye, without relief from the usual remedies. At length, a mild attack of gout took place in one foot, doubtless solicited (though not expected, it being his first fit) by the pediluvium and friction, of which he had made a free employment. He adds\*, “*Oculorum inflammationem statim minuit, ac diebus insequentibus, sustulit.*”

Such exchanges of disease have been called *conversions*; and the subject has been illustrated by many authors†.

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\* *Morgagni*, Epist. lvii. p. 221.

† *Hoffman de Morbis Mutandis*. Dr. Ferriar, “on the Conversion of Diseases.” The late Dr. Parry, in his *Work on Pathology*, has presented us with much interesting disquisition on the subject.

## OF THE PAROXYSM.

The description of *Sydenham*, drawn from his own sufferings in this disease with the hand of a master, is given with much spirit, and has been generally quoted for its accuracy; but as, in some parts, it is much obscured by the doctrines of the humoral pathology, and is altogether rather circumscribed, I shall venture to delineate its history from the results of my own inquiry and careful observation.

*Of the Symptoms of a First Fit.*—Whether any premonitory symptoms have occurred, or that the patient is seized with gout, while in the apparent possession of health, the most frequent time of the active invasion of the fit, is between twelve and three in the morning; the exact period being liable to some variation, according to the peculiarities of constitution in the individual, his habits, and his hour of rest. He is suddenly awoke\* with pain in the affected part, which is most commonly the ball of the great toe of one foot only; and immediately experiences, in a slight degree, sensations of heat, stiffness, and weight; which soon increase to burning and throbbing. He is restless, feverish, and watchful, till about five or six in the morning, when, under favourable circumstances, an abatement of the symptoms, with gentle perspiration, permits some tolerable sleep†. Usually,

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\* In those cases in which the symptoms have come on with rapidity before bed-time, the patient, according to my observation, has been indulgent in the luxuries of the table, and has had a quick, although imperfect, digestion.

† I have met with more than one instance of a first fit, in which the patient having slept with more than usual profound-

on the first morning, the surrounding integuments are swollen, the skin is slightly red, in some instances universally shining as if varnished, and the veins of the foot, in a direction from the inflamed part, appear remarkably full. In a severe attack, there is scarcely any remission of the symptoms for two or three days; but more usually, they are suspended or much abated in the day, and return with violence late in the evening, or before midnight, lasting till about five in the morning. Even on the first morning of the disease, the integuments pit slightly on pressure; and on the second morning this effect is very distinct, although the tenderness is too great to allow a free examination of this kind. The surface is now of a vivid scarlet red. The patient complains of shooting pain, throbbing, heat and weight, with intense sensation of gnawing, as if from the biting of an animal. The least compression of the joints is scarcely to be borne. The pyrexia and disorder of the natural functions, as dependant on the first fit, appear to be truly sympathetic; and are proportioned to the local inflammation and pain. In very slight attacks, the sensible influence of the disease upon the system is so moderate, that sometimes the patient thinks he has received a strain, or some kind of local injury, and treats it accordingly\*.

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ness through the night, has been astonished in the morning to find the gout severely fixed in one foot, which he discovered only on attempting to leave his bed. In a few other cases also, the sleep was merely disturbed by uneasy dreams; and when the hour of rising came, the gout had to a great degree taken its station, with one patient in the ankle; with the others, at the ball of the great toe; wholly unexpected.

\* In one instance of unexpected gout in the winter season, a gentleman first persuaded himself that a severe chilblain had



In the first fit, the attacks of this kind usually prove only of two or three days' continuance; but, in contradiction to this general statement, I know a case, in which one foot was first attacked, and, it being considered as an inflammation from a supposed strain, was treated with an oatmeal and vinegar poultice. The other foot shortly became affected, and three months elapsed before this patient regained his health, proper treatment having been neglected. In another case of first attack, the ball of the toe being the part affected, the patient, conceiving that he had suffered a strain, applied a stimulating poultice. This fit was more tedious and painful than any which he has since suffered, although he has been gouty for many years.

The œdema which has been mentioned, continues a short time after the disappearance of inflammation; and frequently the cuticle of the affected part desquamates, with much itching. The duration of a first fit is seldom less than five, or more than ten days. It now and then happens, that the other foot also becomes affected in succession, giving rise to similar phenomena, but with greater consequent disorder of the system; and such fits also are sometimes very tediously protracted, if left to their natural course. I am informed by a lady, that in her first fit, each foot being affected at first in succession, afterwards together, next appearing to recover, and then again alternately relapsing, five months of suffering were passed over before she felt any degree of convalescence. Another lady also relates to me, that her series of sufferings in the first fit was continued beyond four months;

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seized the foot; but rubbing the part freely with a stimulating embrocation, he violently aggravated the inflammation, and then discovered his error.

in the course of which time, one foot, each knee, wrist, elbow, and shoulder, were affected in as severe a degree as I have ever heard described\*.

A gentleman of generous but not intemperate habits, in whose family gout was quite unknown, after a long walk, felt a remarkable stiffness in the tendo achillis, and concluded that he had received a slight strain. The sheath of the tendon became distended, and the integuments rather œdematous; but not until a few days had elapsed, did he discover the real nature of the disease. In the evening, rigors and head-ache took place, and in the morning, the great toe was stamped with the true characters of gout.

I may state as a general fact, that the gout is more disposed to be mild and regular in its first attack in men than in women.

In five hundred and sixteen cases of gout, I have made the following comparison of the parts affected in the first fit:

	<i>Cases.</i>
In the great toe of one foot only. . . . .	314
In the great toe of each foot. . . . .	27
In the knee and great toe. . . . .	1
In the little toe and the one adjoining. . . . .	1
In the great toe and instep. . . . .	4
In the great toe and instep of each foot. . . . .	2
In the great toe of one foot, and instep of the other	1
In the great toe, instep, and ankle of one foot. . . . .	1

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\* This case, which from the outline of my statement may appear to belong to rheumatism, was certainly an example of acute and chronic gout. Both from the communication of the medical attendant, and from my own observations when the patient came under my care, I am convinced of the fact.

In each great toe, and each hand. . . . .	1
In the external side of the foot, and the great toe. .	1
In the external side of one foot, and the great toe of the other. . . . .	1
In the heel, and the great toe. . . . .	2
In the ankle of one foot, and the great toe of the other	5
Ditto, . . . . . and ditto same foot. . . . .	11
In the tendo achillis, and the great toe of the same limb . . . . .	1
In the outer side of one foot. . . . .	10
In the outer side of each foot. . . . .	1
In the sole of the foot. . . . .	4
In the heel of one foot. . . . .	6
In the heel of each foot. . . . .	2
In the heel and instep of the same foot. . . . .	2
In the heel of each foot, in each hand, and each elbow	1
In the ham . . . . .	1
In the knee. . . . .	11
In each knee . . . . .	1
In the instep of one foot. . . . .	25
In the instep of each foot. . . . .	6
In one instep first, afterwards each knee, each wrist, each elbow, and each shoulder. . . . .	1
In one ankle. . . . .	36
In each ankle . . . . .	11
In the ankle and instep of one foot. . . . .	4
In the tendo achillis. . . . .	4
In the tendo achillis, and ankle. . . . .	1
Calf of the leg. . . . .	1
In the thumb, knee, ankle, and great toe, on one side, and, lastly, the great toe of the other foot. . . .	1
In the right knee and left hand at the same time. .	1
In the back of one hand. . . . .	4
In the wrist. . . . .	4



Thumb and hand. . . . .	1
In the thumb . . . . .	1
In two middle fingers. . . . .	1
In one middle finger. . . . .	1
In the fourth finger . . . . .	1

From this statement it appears, that although *podagra*, as descriptive of the part affected in the first attack, contains the more general truth, yet so much exception prevails, as to render it too limited a term even to mark the first fit, as a positive designation.

I find that in the examples of hereditary gout, the great toe has been for the most part the situation first chosen, and that the most remarkable exceptions have been in those persons who have wholly acquired the disease.

The frequency of the returns of gout after the first fit, is in proportion to the constitutional tendency of the disease, and to the unfavourable mode of life of the individual. If the toe of either foot was the affected part in the first fit, the same toe is most frequently the part invaded in the second fit; but it seldom happens that the other foot escapes. The phenomena which arise, are similar in their character to those I have already described, but are more marked in their degree, are of longer duration, and, from the connexion which the local symptoms are discovered to have with the general system, the constitutional nature of the disease becomes gradually more and more manifest.

As the disposition of the constitution to gout increases, the intervals become shorter, the fits are of longer duration, and the parts affected more numerous. The gout, more than any of the other phlegmasiæ, is disposed to return at periodical intervals, and sometimes, in its annual visit, it is punctual almost to a day. One patient

informs me, that for three years in succession, his attack returned on the 12th of April, and several others have assured me of a similar occurrence, almost in the same degree.

The early part of spring and the latter end of autumn, are periods during which it is most prevalent; for in these seasons, changeable weather with its attendant vicissitudes of heat and cold (the strongest of all the exciting causes of gout), is the most productive source of injury to the human frame. There is no part of the year which gives absolute exemption from the disease, when it is much established in the constitution; and summer alone is the period of expected security.

I have met with some cases in which the first fit has taken place in the middle of summer. One patient declares that his worst attacks occur in summer; and another states, that all his fits have occurred in this season, except in one year, when a second afflicted him in winter. In our English climate, this account still involves in its explanation, the exciting cause of *vicissitude of temperature*.

I must add, however, that continued excessive heat of weather is very unfavourable to gouty persons; and of this fact I met with numerous proofs in the remarkably warm summer of 1818. Some of my gouty patients of relaxed constitution affirm, that they find themselves altogether more indisposed in the summer than in the winter season.

The general circumstances of attack are such as have been already mentioned; but the premonitory symptoms, and subsequent sympathies in the paroxysm, usually increase in strength with each returning fit. Yet of its notice of invasion, such is the capricious nature of this disease, that even confirmed gouty subjects are some-

times attacked at the very moment, when they most congratulate themselves on the possession of health and strength; and I have witnessed some fits, thus sudden and unexpected, to be very tedious and severe.

In a few individuals, the gout never chooses any other situation than the feet; but in much the greater number of examples, in the course of its progress, many parts become affected in the same paroxysm; and although the inflammation establishes itself in its different seats, in succession, it often occupies many parts at the same time; either raging with pain in all its situations, simultaneously; or affecting the different parts successively, with alternate violence. The feet, knees, hands, and elbows, become indiscriminately affected\*; and, together with the ligaments of the joints, the bursæ mucosæ, the sheaths of tendons, and the muscular aponeurosis, in various situations, are the frequent seats of the disease.

I have more than once seen the whole of the tendinous portion of the gastrocnemius muscle severely affected with gout. In some martyrs to the disease, not only the shoulders, but even the hips themselves are now and then affected with all the characteristic pains of the disorder, in the course of a long fit. The rapid and indeed instantaneous manner with which the inflammation sometimes quits one part, and transfers itself to some other part of the same limb, is not the least curious among the various cha-

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\* It is however worthy of notice, that, on many occasions, the disease has a remarkable disposition to observe a certain order; attacking, for instance, in a regular series, the right foot, the left foot, the right knee, the left knee, and so on; or, the right foot, the right knee, the left foot, the left knee.



racters of gout. As in the early attacks of the disease, so in all its returns, the night is the most common time of its invasion, and the period of the greatest suffering; yet instances are not unfrequent, in which the patient is surprised in the day by this unwelcome visitor, and often in a manner almost incredibly sudden. With some few, the pain prevails most during the day, and night brings a little soothing influence of sleep; but to others, neither day nor night scarcely gives any intermission of torture, for the first few days of an inveterate attack. One gentleman informs me, that, in a late attack, the agony which he suffered from the gout in both feet, subsided only in a slight degree in the day, for three days and nights. Another, that during thirteen days, he did not procure more than thirteen hours sleep. A third much afflicted patient describes, that a whole fortnight of the paroxysm gave him continued misery and torture, almost without the least abatement of suffering in the day; and that during the whole time he could scarcely endure the weight of the sheet upon his limbs. The gout, in this case, was situated in both feet and both knees.

But even this account is a feeble and inadequate description of the extreme distress which an urgent fit of gout affecting the upper and lower limbs, in every part, produces. Witness the disabled patient, lying in agony, in one continued posture, unable to move hand or foot, requiring even to be fed, and reduced to every humiliating circumstance of helpless suffering!

The external appearances of the disease vary considerably, according to the situation and particular texture of the part which is affected. The redness of surface, together with œdematous swelling, are most remarkable on the great toe, on the foot, the back of the hand, the fore arm; and at the elbow; while at the ankle, knee, and

wrist, the increased bulk is produced chiefly by the distension of the bursæ, and of the sheaths of the tendons, and takes place often with little change in the natural colour of the skin. If there be redness, it appears, in these parts, chiefly in patches. In the situations before mentioned, the colour, which continues for some time to be of a scarlet hue, is diffused over a considerable extent of surface, and occasionally assumes the aspect of spreading erysipelatous efflorescence; and this sometimes in so great a degree, as to imitate erysipelas itself. When the cellular parts have been for some time swollen and tense, the blood which has stagnated in the loaded and obstructed vessels, ceases to give the vivid blush of red, and changes to the different shades of purple.

In some few instances, under my observation, the patient being corpulent and of a full habit, with a temperament partaking strongly of the sanguineous, the capillary vessels have partially given way to the force of the circulation, and the skin has been here and there, in minute spots, discoloured with the effused blood.

When the bursæ mucosæ are affected with gouty inflammation, they become distended, are exquisitely tender and painful, and often increase to a great size very suddenly. Sydenham observes, "Sometimes the morbid matter is thrown upon the elbows, and occasions a whitish swelling almost as large as an egg, which becomes gradually inflamed and red." This swelling is the enlarged bursæ. I have seen it formed in the course of a night, and sometimes even more suddenly, to a great size, in the ham, near the glutæi muscles, and at the elbow as above mentioned. Sometimes these bursal distensions subside suddenly; but more commonly they continue permanent, tedious, and often untractable. This happens more particularly at the knee joint, in



which situation the bursæ become exceedingly distended, occasionally without any discolouration, and bearing free pressure; but in other instances the skin exhibits much heat, redness, and tenderness to the touch, with great fulness in the surrounding vessels; and, in each case, the patient is either quite disabled from motion, or rendered very lame. At the great toe, the bursal swelling often assumes all the threatening appearances of an abscess. In a gouty hand, I have seen an old ganglion put on a similar character, and producing acute throbbing and excessive pain. The affected tendons, when carefully examined, appear to be much thickened; and sometimes seem not only large, distended, and rigid, but also, particularly at the wrist, inseparably matted together.

The ligament of the patella, when much affected with gouty inflammation, produces peculiar lameness, so that the patient can scarcely make the least extension of the limb without insupportable pain. A slight swelling of the part may be discovered, with great tenderness; but there is seldom more than pale redness of the skin. This appears in a small patch, and, very commonly, the integuments possess their natural hue.

In urgent and continued gout, the veins of the whole limb are preternaturally distended with blood, and, when contrasted with the healthy limb, present the appearance of universal fulness. This state of the veins is most remarkable in the leg, but in the arm it is also very distinct. Near the part inflamed, the venous branches appear very numerous, diverging in their course, and almost bursting from fulness. The congestion which is here represented, becomes in some degree diminished, when abundant effusion into the cellular membrane has taken place at the gouty part; but even then the symptoms soon become aggravated by any attempt to keep



the limb in a depending position ; and if the patient endeavour to raise it even in a small degree, he feels it restrained, as if by a heavy and irresistible weight.

The disabled appearance of parts which have been long subject to the ravages of gouty inflammation, an appearance which is sometimes so distinctly marked as to resemble paralysis, is most strikingly exhibited in the hands and individual fingers.

The pain which is inflicted by gout, is much more severe than that from almost any other kind of inflammation ; and the complicated sensations that result from it, are really of a nature peculiar to this disease.

The pain which the patient describes, seems to be considerably modified by the particular texture and situation of the part affected. Observation has taught me, that the sense of weight and total loss of power are most severely felt, when the whole of the anterior part of the foot is the seat of disease ; that inflammation in the first joint of the great toe produces the strongest throbbing ; and that the sense of tightness is most urgent, when the elbow joint and the tendons at the wrist are the parts affected. I gather from a careful comparison of different cases, that the two last situations are, of all others, the most afflictively painful. One gentleman, who has had very sad experience in the sufferings of the gout, considers the ham-strings as the most painful part ; another, the ligament of the patella. In a fit in which the gout fixes in various situations, both old and new, any part which is for the first time affected with the inflammation, is usually represented to be the severest source of suffering. Accordingly as the affected parts are tendinous in structure, the difficulty of motion is increased, and the most careful attempts are followed by agonising pain, and sudden excruciating cramp. This occurs even when,

from external appearances, a slight degree only of gout is manifested. I have often seen these effects in a very striking manner at the close of the fit; and in one instance most remarkably, where gout was lingering in the tendo achillis at its insertion.

When the constitution has long been under the severe dominion of gout, scarcely any part of the body is exempted from its occasional influence. I have witnessed the jaw to be affected with severe pain in the paroxysm, which, as it kept pace with the pain in the extremities, appeared to arise from gout. It sometimes happens that a branch of nerve in the extremities is distinctly affected. I have seen examples of this kind in the instep, in which there was no external appearance of disease, but the tender nerve was easily traced. In one case indeed, the torture was more excruciating than I have ever known to be produced by gout.

Sydenham described the sense of heat experienced in the height of the paroxysm, *as that of water just warm being poured upon the membranes of the affected part* ("cum sensu quasi aquæ tantum non frigidæ, partis affectæ membranis affusæ"). This is a very inadequate account of the sensation of temperature produced by the local action of gout; which rather conveys to the patient's mind the idea of *boiling* water; or, in the strong language of some patients, even of boiling lead. The quantity of heat which is evolved from the inflamed surface, is found by the thermometer to be always, more or less, at a higher temperature than the natural standard. The strong metaphorical terms, by which gouty persons endeavour to convey an idea of their sensations during the paroxysm, are evidences of the extreme severity of the sufferings which this disease inflicts.

In order to exemplify in a familiar and striking man-



ner this particular point, I shall state my quotations, abstracted from several cases, in the language of patients themselves, while describing to me their feelings during the height of the paroxysm.

*J. L.* aged forty-six, had *acquired* gout, first at thirty-five. In the last fit, different parts became affected in the following order: the right hand, right elbow, right toe, left knee, right ankle, left toe, left ankle. The inflammation affected several of these parts at the same time; but, in general, with alternation in the severity of pain. He felt as if wedges were forced into the joints, and were effecting their separation: and a throbbing tightness, as if from a strong ligature; a burning heat, and oppressive weight; were sensations all present in an exquisite degree. Upon the smallest movement of the fingers, instant pain and spasm seized the fore arm and elbow; and when the toes were moved, the whole foot and ankle became similarly affected.

*M. K.* aged fifty-five; first had *acquired* gout at twenty-eight. Describes the pain, "as if a saw were at work in the joints;" has spasms on his first attempts to sleep at night, followed by agonizing sensations of cutting, pricking, and excessive throbbing: and feels the heat, as if from scalding water poured between the affected parts.

*T. L.* aged fifty-one; first had *acquired* gout at thirty. He compares his pain to the severe gnawing of a dog acting upon the joint, accompanied with cuttings and prickings; and with heat sometimes as from hot lead; and the sense of weight is intense. He also describes the pain at the ball of the great toe, as sometimes resembling that of a severely aching tooth.

*A. G.* aged forty-two; first had *acquired* gout at thirty-five. His legs, in the paroxysm, are often cold,



while the affected feet burn, as if on hot coals; with throbbing, and piercing shootings, sometimes as if a knife were thrust in; and he can scarcely describe the intolerable weight.

*J. P.* aged forty-two; first had *acquired* gout at thirty-six. Expresses the feeling of heat, as if the parts were in a furnace; with pulling and throbbing; and has a sense of weight, as if a hundred weight were placed on the foot.

*D. R.* aged fifty-four; first had *acquired* gout at fifty. He is usually attacked about two in the morning, with violent shooting and gnawing pains in the great toe, which he compares to the sensations he felt some years ago, when the small bone of his leg was re-uniting after a fracture.

*E. S.* aged fifty; first had *hereditary* gout (from his father) at forty-seven. The burning pain of the affected parts, is compared to the heat of a red-hot iron; the oppressive sense of weight is as if they were covered with a mill-stone; to which are superadded distressing throbbings, with quiverings of tendons, and spasms of the muscles; and the skin feels as if girt with a strong ligature.

*J. S.* aged forty-one; first had *hereditary* gout at thirty-four. In his last attack in the feet, he conceived that some one was boring into the joint with a gimblet; then that an abscess was forming; and, at the height of his suffering, thought that he could not have suffered more even from *amputation* of the part. Cramps in the muscles of the legs and the toes, and also in the intercostal muscles, were severely distressing.

The strong expression of wrenching and tearing of the parts, as if the ligaments were undergoing forcible separation, is a very common description in the language of the gouty sufferer.

A lady, remarkably of the nervous temperament, describes that while the inflamed part of the foot occasions intensely burning sensations, the other parts are in the contrary state, as if resting upon cold marble.

In addition to these symptoms, the consequence of gout alone, the patient is sometimes afflicted with accompanying rheumatism, which affects either the neck, shoulder, loins, or sciatic nerve; and in some urgent cases, in which continued exposure to wet and cold had been the exciting cause, I have seen two or more of these situations under its influence, at the same time that gout has been raging in other parts. If any of the other phlegmasiæ has either preceded, or immediately accompanied the attack of gout, it most commonly soon yields to the latter disease, as I have before mentioned; but the symptoms of rheumatism, when just precursory, or co-existing, are usually more obstinate and fixed; although, even this complaint occasionally yields immediately to the superior influence of the gout.

Lately I saw a case in which lumbago preceding the attack of gout, almost immediately yielded to the latter.

The *constitutional* symptoms of the paroxysm are now to be further noticed.

In very slight attacks of the gout, it sometimes happens that the secretions do not exhibit to the eye much morbid appearance; although a regular examination of them invariably present the proof of some degree of error. In severe cases, the digestive functions are evidently much affected, as is shewn by the following indications:

The tongue is furred; there is thirst with loss of appetite. The stomach is affected with flatulency, occasional spasms, and many uneasy sensations. In conjunction with nausea, and sour eructations, a watery fluid



is sometimes rejected, which is very acrid and acid. It is either colourless, or of a grass-green appearance; and, in a long fit, this occurrence happens from time to time. The bowels are for the most part torpid; and, being excited by medicine, the *fæces* appear unusually foul and offensive, are dark in colour, blackish, or of an olive green; or, in some cases, of a clay-like appearance; and often are remarkably loaded with vitiated mucus. The urine is of deeper colour than natural, is secreted scantily with relation to the quantity of the patient's drink; and, on cooling, deposits a pink or brick-dust sediment, with much mucus. Its specific gravity is much increased beyond the healthy standard.

During the most urgent symptoms of the paroxysm, it is usually passed with considerable irritation, both as to frequency and sense of heat. The pink or lateritious sediment appears, more or less, in every portion of the urine, during the inflammatory symptoms.\* When these have entirely subsided, and the state of the liver (on the condition of which, the symptom in question principally depends) is still remaining unhealthy, the sediment of the urine often assumes a whitish colour, and is compared by the patient to the appearance of magnesia.

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\* In the London Medical Repository, the Reviewer (who has done me the honour to notice this Treatise at great length) is in error in the following criticism: "There is some degree of incorrectness in regarding the deposition of the pink sediment as one of the symptoms occurring during the continuance of the paroxysm, as it does not begin to appear until it is fairly over, or the crisis is passed." No. for Oct. 1816, p. 294. I can confidently state that the deposition of the pink or lateritious sediment *begins* with the paroxysm; provided that the paroxysm itself commences with urgent symptoms; upon which, it is the attendant.



This and the pink sediment frequently alternate, the one or the other appearing, as nervous or inflammatory action most prevails.

The sensibility of the nervous system, as is shewn by what has been related of the sensations of the inflamed parts, is in a high state of morbid excitement.

Sydenham describes his pain in the beginning of the fit, with all the force of figurative expression; so unequal are the terms of ordinary language to give a picture of the sufferings of the gout. He represents the pain as that of "a dislocated bone," and sometimes as "from the gnawing of a dog." He adds, that "the membranes of the parts affected become so exquisitely painful, as not to endure the weight of the clothes, nor the shaking of the room from a person's walking briskly therein. And hence the night is not only passed in pain, but likewise with a restless removal of the part affected from one place to another, and a continual change of its posture. Nor does the perpetual restlessness of the whole body, which always accompanies the fit, and especially in the beginning, fall short of the agitation and pain of the gouty limb."

Some patients inform me, that in their most painful fits, they suffer still more distress from nervousness and general irritation, and extreme restlessness, than from the pain itself.

In persons of irritable constitution, the extreme pain which is sometimes produced by gout, has the effect of disturbing the brain and nerves so violently as to occasion high delirium.

In examining the character of the gouty constitution in an extensive collection of cases, I find that the disposition to cramps in the limbs is a very prevalent symptom, not only just previous to the fit and during its continuance, but also in the interval, from the influence of rather

slight circumstances. As a general calculation, it appears to me that nine in twelve are so affected. Some gouty persons suffer in the stomach what they describe as cramp, if incautiously they take vegetable acids, or fluids very cold.

The muscles situated on the thigh and leg are the most frequently affected : but those which move the toes and fingers; the diaphragm; the muscles of the chest, the abdomen, and even of the ribs, are not spared in this painful affection. Almost any change of posture serves to produce the spasmodic action, when the disposition to it prevails. I have seen a patient instantly seized with cramp on the most careful attempt to extend the leg, when the gout was present; the gastrocnemii muscles becoming afterwards visibly trembling and convulsed. One person expressed, that, with every spasm, he felt as if painfully electrified over the whole frame. Some describe the agony of the cramp as being the most painful suffering which they experience, and declare that they think the duration of it beyond the one or two minutes for which it does continue, would be wholly insupportable. A jerking of the limbs, and excessive restlessness, in the early part of the night, may be added to the distressing list of symptoms.

A general febrile action usually accompanies the local inflammation. This febrile action is symptomatic, and, together with the pain and increased disorder of the affected parts, returns at night, and remits when the local symptoms become relieved in the morning; but when the local symptoms do not remit, the febrile irritation is also constant. In the evening, and sometimes in the day, the patient complains of transient chills affecting the frame generally; or, in a more partial manner, they run in the course of the spine alone. Some suffer this symptom, which occasionally amounts to a strong rigor, toge-



ther with much lowness of spirits, on first going into bed: and it is followed by an irregularity in the distribution of the animal heat; one part having the sensation of dry and burning heat, another of *marble* coldness. When a strong inflammatory diathesis is present, or after an excessive application of some of the exciting causes, the action of the heart and arteries is violently and permanently increased; and, universal heat of skin with the usual symptoms of pyrexia are proportionally urgent.

Erysipelas in some constitutions accompanies the acute gout. I have also in some cases seen it precede the fit; in others, follow it.

Painful hæmorrhoids, with occasional discharge of blood, not unfrequently accompany the gout. During the fit it sometimes happens that much distress arises from the irritable state of the prostrate gland, in which both the urethra and the bladder participate.

The painful irritation which occasionally affects the kidneys in the paroxysm, is usually dependant on the presence of small calculous concretions; and much torture is sometimes experienced, attended with considerable inflammatory action in the vessels of the kidneys themselves. The symptoms which mark the favourable decline of the paroxysm, will be described under the head of *Prognosis*.

The same internal causes which support a tedious and harassing continuance of the fit; or, as Sydenham has well expressed it, "the chain of fits," also often induce a severe relapse, at a moment when the patient flatters himself with the expectation of recovery. In this condition of the constitution, a relapse may follow a slight application of any of the remote causes, till weeks, or even months, have elapsed.

The restoration of general health and vigour in some



instances precedes the recovery of the limbs; but in others, is delayed till long afterwards: and, where proper treatment has been neglected, in old and violent gout, the lameness and tenderness of the affected parts continue very permanent; the patient cautiously chooses the most even ground for his walking exercise; and still, with every care, his foot sometimes turns suddenly as if it were dislocated: producing exquisite pain.

With respect to the length of the interval between the paroxysms, Sydenham has observed, "According as the immediately preceding fit has been more or less severe, the following fit comes on in a longer or shorter space of time; for, if the last fit proves violent, the next will not attack the patient till the same season of the year returns again."

This observation is not without its share of truth; but it may be remarked, that the benefit of a longer respite is in this manner dearly purchased! nor is the advantage certain. A long and violent fit is often succeeded by another of equal magnitude, in the same year. Some relate that when they have enjoyed an unusual interval from a fit, any slight cause will serve to excite an attack.

Finally, it may with little exception be stated of the gout, that it acquires strength with each returning fit, both as to the number of parts which it attacks, and as to the duration and degree of suffering; and that it does not, like some chronic diseases, wear itself out by repetition, and yield to the friendly power of time. Both constitutionally and locally, also, the susceptibility to the disease increases. A premature old age comes on; and, together with crippled and painful limbs, the nervous system is so enfeebled, that both mind and body grow less equal to sustain the conflict.

Such is the melancholy but faithful portrait of the disease, when it is permitted to pursue its *natural course*; —such is the sad and certain tyranny of *neglected and encouraged* gout !

## SEQUELÆ OF GOUT.

The sequelæ, or occasional consequences of acute gout, may be divided into those which are *constitutional* and those which are *local*.

The chronic form of the disease is of frequent occurrence.

The same state of system from which gout has been much produced, sometimes gives rise to apoplexy, and paralytic affections ; and very usually induces habitual cramps, and much nervous irritation and wandering pain.

A diseased condition of liver, sometimes proceeding even to a material change of structure, belongs to the train of gouty evils ; for seldom indeed is the action of this organ healthy, either before or during the paroxysm. In two very gouty females, I have met with chronic splenitis. Such, at least, was my view of the disease. For the reasons already stated, hypochondriasis is a common consequence of frequent gout.

The stomach often becomes permanently weakened ; or even where it continues in due vigour, as far as is judged of by the appetite, it is found that an impaired state of the digestive functions, with irregular action, and generally a sluggish condition of the bowels, are almost the certain consequences which follow a long series of gouty attacks.

Irritation of the urinary organs, and gravel, occur rather before and during the paroxysm, than in the interval; and, according to my experience, calculus of the bladder is a very unfrequent complaint amongst gouty persons. The contrary opinion appears, however, to prevail. *Sydenham*, after enumerating the effects of the disease, “in the pain, lameness, inability to motion of the parts affected, the sickness, and other symptoms,” adds, “the gout breeds the stone in the kidneys in many subjects; either because the patient is obliged to lie long on his back, or because the secretory organs have ceased performing their proper functions; or else because the stone is formed from a part of the same morbid matter; which, however, I do not pretend to determine. But from what cause soever this disease proceeds, the patient is sometimes at a loss to know whether the *stone* or the *gout* be most severe.”

*Morgagni*\* relates the case of an arthritic patient, who had also *nephritis calculosa*. He died apoplectic. On examination after death, it is stated, “The kidneys were found larger than they naturally are, but the right was the largest; so that, together with the fat whereby it was covered, it was almost equal to the size of a man’s head. Therein were eleven stones; most of them large and ramifying. In the left was one, and that also was ramified and small. They resembled, in colour and branches, black coral.” *Morgagni*, in another part of the same Epistle, observes, “The calculi of the kidneys are often joined with the gout.”

In investigating this question of the occurrence of the calculus in the bladder (the disease which we call the

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\* Ep. lvii.



stone), in those subject to gout, I find that amongst five hundred persons, five only were so afflicted; although I have met with many severe cases of gravel in connexion with gout; and in several instances, the calculous concretions which have been discharged by the urethra have been of considerable size.

The local changes produced by the gouty inflammation are various. The cartilages, in aggravated cases of gout, undergo erosion, and consequent loss of function in the joint, more or less complete; or, in the worst instances, they become entirely removed by the subsequent action of the absorbents. When this has happened, a vacuity is discovered at the joint, easily detected in the examination of the living subject. In the hands and feet these changes most occur; and then the fingers and toes are distorted in different directions

The synovial secretion frequently fails in its healthy quantity and quality as a consequence of deep-seated gouty inflammation; whence arise stiffness and lameness of the joint, with snapping, and an indefinable sensation of dryness in the parts, upon motion.

A gentleman who suffered gouty inflammation in the ankle, six months ago, says, that in addition to much weakness of the part, he has often the sensation as if there was gravel within the joint.

The ligaments become thickened, shortened, much deprived of their elasticity, and habitually tender.

The bursæ mucosæ acquire a state of permanent distention, and are sometimes enlarged to a great size; being soft and yielding to the touch. Of the small bursæ, the contents occasionally become so much inspissated, as to constitute hard, solid tumours, which, in some instances, are with difficulty distinguished from bone itself. The bursal disease over the first joint of the great toe,

which is familiarly known by the name of *bunion*, is a very common complaint with gouty persons. The deep-seated and immediate textures of the joints, which have now been described, in some lamentable instances are so completely disorganized, that the most confirmed and irreparable lameness ensues. The parts appear entirely consolidated together, and are as immovably fixed as in bony ankylosis itself. I have witnessed two remarkable cases in which the ankle joint in each limb was distorted to such a degree, as to give the appearance of club feet, with still greater lameness from the tenderness of parts.

The secretion from the sheaths of the tendons is also vitiated in a similar manner; and hence arise, the thickened knotty feel of gouty tendons, their hardness, contraction, and rigidity.

The muscular aponeurosis sometimes becomes thickened and contracted from gouty inflammation; and the muscles themselves apparently become shortened from the influence of frequent spasm. This morbid change in the aponeurotic texture, in a great degree restrains the moving powers beneath it, from their necessary freedom either of flexion or extension. In one patient, who has suffered repeated severe gouty inflammation in the gastrocnemius muscle of one leg, I find such a state of *board-like* hardness, as to conclude, that adhesion has taken place, between the aponeurotic texture and tendinous fibres of the muscle, and the covering integuments.

A varicose state of the veins of the legs causing habitual sensations of achings, fulness, and heat, not unfrequently occurs in old gouty persons; and is occasionally accompanied with purple cutaneous spots (blotches); and, though more rarely, with ulcerations of the skin. In the legs of three gouty men, advanced in years, I have seen *ichthyocosis* existing in a very great degree.



Dr. Munro, jun. observes\*, “The extremities of the bones of the feet and hands have been said to be occasionally converted into a white substance like chalk, in persons who have long been afflicted by gout.” I conceive this to be a wrong description with regard to the bones. The only cases of gout in which the bones become affected, are in those occasional examples in which the uric concretion becomes deposited in the neighbourhood of the joints, when we find, as seen in morbid preparations, that the bone itself suffers a kind of change which I shall presently describe; but the conversion, of which the Professor speaks, is an erroneous expression.

In the interesting case of dissection of a gouty person by Mr. Watson, the following account is related: “On the middle of the right tibia, there appeared an oblong tumour resembling a node; over which, the integuments were very thin and ready to burst. It was a mere deposition of chalk-like matter, between the skin and periosteum, and, though thick and large, had not as yet done any injury to the bone.” The author also states, “One of the great toes was found to be much enlarged; and, upon dissection, the first joint of it was found to be enclosed in a bed of chalky matter like a fossil shell; but the bone itself was neither increased in size, nor altered in its texture.”†

The gouty concretions (commonly called *chalk-stones*) occur only in a few individuals of particular gouty idiosyncrasy. They result from an inspissation of the peculiar morbid secretion which constitutes their composition, and are found in various situations from within the synovial

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\* Outlines of Anatomy, vol. i. p. 154.

† Medical Communications, vol. i.



membrane of the joint, even to the layers of the cutis. I have found them in the living subject, filling the bursæ, and condensed to great hardness; in the sheaths of tendons, feeling almost stony; in the cellular membrane, either in hard or soft lumps; and under the cuticle, pressing for escape.

I have witnessed many distressing cases in which the concretions near the surface have caused numerous ulcerations both in the hands and feet, the chalk-like matter being constantly secreted in great abundance.

Painful abscesses also occur, in which the secretion resembles a thick mixture of chalk and water.

In several persons who have gouty concretions both in the hands and feet, I have found a remarkable state of hardness in the nails of the toes and fingers; they had an extraordinary brittleness; were frangible, and scarcely capable of being cut.

The concretions are in some persons very partial, as in the lobe of one ear or both ears; the fingers, one or more; one or both elbows. I have, however, met with instances in which they have been so universal, as even to appear under the tunica conjunctiva of the eye.

In very confirmed cases of concretions in the hands and feet, the fingers and toes present a sad spectacle of disorganization. When the deposit is external to the joint and contained within the bursæ, or the thecæ of the tendons, the finger or toe is stiff almost to the degree of a perfect anchylosis. I have seen a complete state of anchylosis in the small bones of the feet, chiefly caused by the accumulation of this secretion, either inspissated, or indurated. When the secretion goes on within the capsular ligament, ulcerative absorption takes place; the cartilage becomes removed; and one or more of the phalanges become curiously bent by the action of

muscles. I have seen from these causes, a finger and a toe drawn across the others in a completely transverse manner; and distortions, in a greater or less degree, are always found in cases of this description.

In the Hunterian Museum at Glasgow, I examined several preparations, shewing the changes of structure caused by the concretions of this kind; and I here offer the written account of them\*, which I copied:

“ L. L. No. 26. s. A finger from a gouty hand; a joint opened, and bent upon itself, to show the cartilages eroded a little.

“ 27. Ditto very much eroded, the joint full of chalk-like substance.

“ 27. a. s. Ditto, the joint invested every where with a thin layer of chalk.

“ 28. s. Thumb from the same hand, shewing the same effect.

“ 29. s. Another thumb, shewing the same.

“ 29. a. s. Ditto.

“ 29. b. s. Another thumb, the chalk accumulated about the joint in considerable quantity.

“ 30. The account omitted.”

I am favoured, by my friend Mr. Brodie, with the following clear and interesting particulars of the dissection of a gouty person.

“ *External Appearances.*—Several joints of the fingers were ankylosed, and the fingers variously distorted. The middle finger of the left hand was shorter than the rest, and the skin over it was loose. The bone of the

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\* The statements are chiefly in the hand-writing of Dr. Baillie.

second phalanx appeared to have been nearly absorbed, so that there were scarcely any remains of it; and there was only a small quantity of soft substance in its place.

“ The right wrist and elbow were ankylosed, as were also several of the joints of the toes. The knees admitted of incomplete flexion and extension, and the motion of the joints was attended with grating.

“ In various parts of the body there were orifices in the skin, communicating with membranous cysts, situated in the adipose substance, and discharging a chalky fluid of the consistence of cream.

“ *Dissection.*—The pleura pulmonalis and costalis were universally adhering. The stomach, spleen, liver, and gall bladder, adhered universally to each other, and to the contiguous parts. The gall bladder contained two large gall stones. There were no other preternatural appearances in the thorax or abdomen.

“ There were no remains of the cartilages of the left knee. The corresponding parts of the patella and condyles of the femur were worn into grooves and ridges, evidently from friction on each other: presenting, however, a compact surface, and not exposing the cancellous structure, as would have been the case, if friction had taken place in the dead body. A thin layer of white chalky matter was deposited on the bones, where the cartilages had disappeared, in several places. On the margin of the articulating surfaces were several small exostoses. The ligaments and the synovial membrane were in a natural state, with the exception of the thin layer of the latter which is extended over the cartilages, and which had disappeared like the cartilages themselves.

“ In the right wrist, the first row of the carpal bones were united by long ankylosis to each other, and to the radius.



“ The other joints were not examined.

“ The patient was an elderly female, who had been subject to severe attacks of the gout for many years, and who was supposed to have died of a cancerous affection of the stomach.”

Of the active influence produced on the absorbent vessels by the stimulus of gouty concretions when deep seated, the following account, with which I have been favoured by Mr. Howship, serves to give a clear demonstration.

“ A female, aged 43, had for many years suffered severely from gout. The attacks of the disease, at first confined to the first joint of the great toe, subsequently affected the articulations of the fingers, the wrists, and the heels; ultimately the hands were almost covered with tumours, the action of the joints of the fingers being all either much impeded, or quite destroyed, by the repeated effusions of chalky matter.

“ For the space of three or four years the disorder manifested itself principally by very extensive, painful, and tedious inflammation of the heel, which ulcerated and threw out a copious and long continued secretion of chalky as well as purulent matter; and no sooner was the one heel recovered, than the other became affected in the same way.

“ In 1815, this patient, still confined to her bed, and totally helpless, from the inflamed and ulcerated state of the heel of the left leg, experienced a very smart attack of erysipelatous inflammation upon the right leg; and when this began to give way, violent inflammation took place lower down at the ball of the great toe. The integuments covering the joint soon sloughed out, and exposed a deep ulcerating surface. A little dry lint covered with a warm poultice, was the only application

made to the parts, which were examined daily. About a fortnight after the separation of the slough, some white matter made its appearance at the bottom of the ulcer, and was removed with the dressings. A few days after this, a mass of soft chalky substance as large as a pea was seen, and was turned out with the end of a probe. In the course of a week, I observed that the same appearance had again taken place; and that the chalky secretion was deposited in exactly the same part of the ulcer as before; and it seemed to be deeper seated than the surface of the head of the metatarsal bone. I therefore made a particular examination with a probe, and thus ascertained that part of the surface of the bone was removed; the margin of the opening being readily felt all round among the granulations. Within this space, there was a depression answering to the form of each of the small masses of chalk that had been previously removed. The ulcer, even within the cancellated texture of the bone, looked tolerably well; it was covered with granulations, and secreted healthy pus.

“ This peculiar secretion continued for some time; a fresh deposit of compact chalky substance being protruded, and removed from the ulcerated space within the bone, every few days, for several weeks. At the termination of this period, the action lost its specific character, and the wound healed.

“ This unfortunate patient, whose case I have already adverted to, in my *Practical Observations in Surgery*, as exemplifying the symptoms produced by gouty affection of the brain, eventually fell a victim to the disease.

“ The above case affords an instance, in which, the capillary arteries within the cancellated structure of bone evidently took up the specific action of gout, by secreting the chalky matter peculiar to that disease. It



appears to me, that the irritation from the inflamed surface, had, in the first instance, considerably disturbed the circulation upon the membranous expansions lining the cancellated texture of the affected part of the bone; increasing the activity of its powers, both in secreting and absorbing. In the papers published in the *Medico-Chirurgical Transactions*, on the Formation, Structure, and Diseases of Bone, I have already stated, that the first effect of a certain degree of irritation falling upon the membranous sheaths and expansions within bone, is a change in the state of the membranes, which, from being thin and transparent, become granulated and opake, from increased vascularity; and that absorption of bone, more or less extensive, is one of the earliest consequences of this change.

“ The circumstance of the bone having been in the present instance partially removed by absorption, argues no new rule for the treatment of such cases; but the secretion of the urate of soda by the capillary arteries within the bone, affords a very curious, and at the same time a very interesting proof, that the circulation within the ossific parts of our fabric, is not governed by laws differing from those that regulate the soft parts of the body; being equally subject to feel the effects of any transient impression, dependant on accidental surrounding circumstances.”

The following is a description of a metacarpal bone in a patient who suffered much from *chalk-stones*. A layer of urate of soda was deposited upon the surface of the articulating cartilage. From irritation, some absorption of the cancellated structure of the bone close upon the joint was produced, so as to cause a shortening of the bone. The uric matter was deposited in almost every part;—in the cancelli; between the laminæ of the capsules of the joint; on the surfaces of the tendons, and



within each theca confining them: in the cellular membrane it had formed tumours. The body of the bone itself had not escaped morbid change, but presented on its surface that peculiar porcellaneous and polished appearance which sometimes occurs in chronic disease of joints.

With respect to the removal of bone which took place in these cases, and which, in the first, occurred in so remarkable a degree, it appears to me necessary to consider it as wholly secondary; and, as being an effect of ulcerative absorption, occasioned by the stimulus of the uric compound confined within the capsular ligaments, and acting as a foreign body. It would seem to be more easy for Nature to remove by absorption, even the texture of bone pressed upon and resisting this deposition from the morbid action of the extreme vessels, than to exert her *vis medicatrix*, in putting a stop to this action of vessels, when there should be too little space for the bone and the secreted matter, both to be contained. On the subject of these concretions, I shall have occasion to remark further, at a future page.

## THE REMOTE CAUSES OF GOUT, PREDISPOSING AND EXCITING.

ALTHOUGH I shall treat of these different causes separately, it is obvious that the distinction is in some degree artificial. The accidental and stronger application of some of the predisposing causes, as, for example, improper diet, strong liquors, &c. is sufficient to render them exciting causes; and the effect which is thus produced, will be in relation to the state of the system; and will be proportional to its readiness to take on the gouty action.

## PREDISPOSING CAUSES.

*Hereditary Predisposition.*—By Dr. Cullen, and by writers in general, gout has been too expressly defined an *hereditary* disease. In conformity with this character, the offspring of the gouty parent should seldom escape from having the disease; and still less, should we find, that in the list of its subjects, the examples of acquired gout, *not* hereditary, form such a numerous class. With a view of obtaining accurate information on this subject, I instituted the following comparison:

In a list of five hundred and twenty-two patients, the number of those in whom the disease was

Hereditary from the father, was,.....	181
————— mother,.....	59
————— father and mother,.....	24
Of those whose grandfather on each side had gout,.....	3
Of those whose grandfather on one side only had gout,.....	37
————— grandmother only had gout,....	3
————— grandfather and grandmother,..	1
————— uncle only in the family had gout,	21
————— aunt only in the family had gout,	3
Not known either on the father's or mother's side,	190
	<hr/> 522 <hr/>

From this statement it appears, that the cases of acquired gout, in which no family reference could be traced, were to the rest as 190 to 332; and in the examples contrasted with those immediately hereditary, as 258 to 264.

Morgagni mentions his own gout as original. Heberden observes, "I have known a female who suffered by the gout, to the degree of having numerous sores from chalk stones, though it had never been heard of among any of her relations." One patient, a butcher, who cannot trace gout to any former generation in his family, informs me, that he and his three brothers suffer the disease in a very severe degree. He has two sisters, one of whom is much afflicted with gravel.

Cadogan asserted of the gout, that "it is not hereditary." In the fair acceptation of the expression, this is inaccurate; but still it comes nearer to the truth than the opposite and more prevailing doctrine. I speak of hereditary disease, as one depending on similarity of organization between parent and child, although it is of too delicate a nature for the observation of our senses, and for direct detection. In the same manner as the natural functions of the body depend on particular structure, so we must conclude to be the case with regard to many diseased actions, which are of a specific nature; such as scrofula, cancer, idiopathic phthisis, or *hereditary gout*.

In my former observations on this part of my subject, I too hastily concluded, that the tendency of the gout to appear early in life, and severe, was much the most strongly manifested in those who possessed the hereditary disposition to the disease. I have now put this question to the test, in examining the cases of two hundred and fourteen persons under my own care, who have had gout in a very severe degree; leaving out of the comparison, all the other cases which I have seen of a milder description. From this estimate, the following result appears :



*In Men, Acquired.*

Before the 20th year, . . . . .	5
Beginning between the 20th and 30th year, . .	30
————— 30th and 40th year, . .	47
	<hr/>
	82
	<hr/>

*In Men, Hereditary either from Father or Mother.*

Beginning before the 20th year, . . . . .	8
————— between the 20th and 30th year, . .	50
————— 30th and 40th year, . .	50
	<hr/>
	108
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*In Women, Acquired.*

Before the 20th year, . . . . .	1
Between the 20th and 30th year, . . . . .	4
————— 30th and 40th year, . . . . .	3
	<hr/>
	8
	<hr/>

*In Women, Hereditary either from the Father or Mother.*

Before the 20th year, . . . . .	2
Between the 20th and 30th year, . . . . .	6
————— 30th and 40th year, . . . . .	8
	<hr/>
	16
	<hr/>

In the most marked cases of men which I have met with, before the 20th year, one began at 16, one at 17, five at 18, five at 19; and the two hereditary cases of females began at 15.

In conclusion, it appears that the greatest number of examples in which the gout commenced with more or less severity before the 40th year, is to be found in the hereditary list ; although the proportion of early *acquired* is so considerable, as to justify my critical objection to Dr. Cullen's strict definition of, " *morbis hæreditarius.*"

Dr. Adams (whose loss we have now to lament), in his late Treatise\*, has drawn a distinction, which appears to me not very well founded, between the disposition and the predisposition to a disease. He attaches the strongest signification to the former of these expressions (for they are only expressions); a signification, which as the word is compounded, is surely rather due to the latter. The epithets of strong and slight, in connection with either expression, would, I conceive, make the distinction sufficiently clear and marked. The author, after having defined his terms, observes, " If it were true in all as it is in most cases, that the habits of the sedentary and healthy are necessary to induce the gouty action, there could be no question, that it is only hereditary in predisposition ; but in some, the susceptibility to gout is so strong as to require no other stimuli for inducing the action, than such as seem absolutely necessary for the support of ordinary health. In *gout*, therefore, we must admit the two degrees of susceptibility, *disposition* and *predisposition* ; nor will it be often difficult to fix their exact limits." In his fundamental arrangement of the subject, the following view is offered : " Diseases either appear at birth, in which case they are called *congenital* or *connate* ; or they arise afterwards. The first only can with propriety be called *hereditary* or *family disease* ; all others we should consider as *hereditary* or *family*

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\* On the supposed Hereditary Properties of Diseases, &c.

*susceptibilities* to certain diseases." This distinction seems both judicious and necessary ; but the reference in each case, must, I apprehend, be made to *structure*. For myself, I confess, that I cannot form any satisfactory notion of hereditary quality, either healthy or morbid, which is not founded on structure. With respect to gout, we see in numerous instances, that the parents, either father or mother, of one or more children who when adult have sooner or later become gouty, had not themselves the disease until many years after the birth of such child or children. The disease is not the less hereditary, in the legitimate meaning of the term, because the susceptibility which is transmitted from the parent to the child, appears at an advanced period of life, instead of being *connate*, or instead of occurring before the age of puberty ; and with regard to gout, it seems, that at this early period of growth, the actions of the system oppose its production. By way of illustration, though the analogy be but faint, I may make reference to the personal resemblance which a child acquires as he grows up, to his father or mother, or more distant relations, and which is not manifested at the infantile age. A gradual developement of function, in connexion with the constitutional tendency to particular diseases, is matter of daily and familiar observation ; and equally implies, as it appears to me, a similarity of structure, brought to maturity by years.

With respect to *family* disposition to gout, and its dependance on hereditary influence, or upon other causes only, the comparison, which I have made, presents the following results. I have found, in some examples, as many of the individuals of a family affected with the disease, and with as much severity, where it has not been known either on the father's or mother's side, as in the opposite instances, in which, either one or other of the



parents has been gouty. In one family, three brothers and a sister, out of six children, have been severely affected; in another, also consisting of six, four brothers have suffered from very aggravated gout, and the two sisters only have escaped. In these examples, the disorder was not known in the two preceding generations. A female, whose aunt only in the family had gout, states that with herself her three brothers had the disorder severely; her sister was free from it. On the other hand, in one family, the father and his two sons and a daughter, out of five children, have had severe gout; in another, the father, mother, and all the sons and daughters, four in number, have been afflicted. Its confinement to one or two only in the number of a large family, is also to be noticed. Thus, out of fourteen children, but one brother and one sister had gout; and this was acquired without any share of hereditary influence. A gentleman who suffered severely, mentions that his father, grandfather, and great grandfather had gout; but he has several brothers, not one of whom has been affected. In another family, of ten children, the father had gout, and one son only was affected; but he very severely. Again, among nine children, six sons and three daughters, the father being gouty, one son only was affected. Such is the variation which prevails; and in the endeavour to discover a general rule of conclusion, I can only say, that, *cæteris paribus*, those individuals of a family, whether either parent may have had the gout or not, will be the most liable to the disease, whose bodily conformation, constitution, and temperament, and particular habits of living, shall be most conducive to that particular state of the system, out of which I consider the gout to arise, and of which I shall treat in regular order. But, before I take leave of the subject, I must remark, that in the case of one or two

only out of a large family of children being affected, although one or other of the parents has had the disease, I have in two or three instances distinctly found the personal resemblance to the gouty parent, to be much stronger in the gouty child than in any of the other children. It is a remarkable circumstance that the gout shall affect almost the whole of one family, having entirely passed over the preceding generation. Of this fact I have met with numerous instances. When *both* parents have gout, we may expect the disposition to the disease to be manifested in *several* of the children. I have not yet met with an exception to the fact. Much, therefore, is certainly to be assigned to the influence of hereditary claim; but authors have hitherto greatly misstated the question.

*The Adult Age.*—The exemption of youth from the gout, is a striking character of the disease. As some explanation of this phenomenon, it appears to me, that during the rapid growth of the body in the early years of life, that plethoric state of the system, which is connected with more or less of congestion in the system of the vena portarum, and upon which, I consider, that a first fit of gout in particular, so much depends, does not take place. The diseases which occur below the adult age, affect more particularly the general arterial system. It is true that in youth, there is an absence of many of the strong predisposing causes of gout, but not to the extent of serving as a sufficient explanation of the point in question. The gout does not usually take place, until many years after the full and continued operation of all the indiscretions and irregularities, which belong to the early life of the adult.

I am persuaded that the commonly-asserted causes,



which represent the existence of the gout in very early youth, are really examples of rheumatism. Some gouty persons have given me confident assurances, that their first fit took place at fifteen; and one gentleman declares, at seven years of age. Another gentleman, whose mother had gout, narrates, with such precision as to demand my assent to the fact, that he was attacked in the great toe at eight years of age. He underwent the operation of lithotomy at twelve. I am sceptical as to the accuracy of most of such statements, at the same time that I admit the occasional exception to the general rule, in the occurrence of the gout between the fifteenth and twentieth year; and of this fact I have already taken notice; but at an earlier period, it must be held as a singular phenomenon.

Sydenham remarks, “ I have not hitherto found children, or very young persons, affected with the true gout.”

Hippocrates has an aphorism on this point, which may be thus translated: *Puer non laborat podagra, ante veneris usum.* Aph. xxx. sect. 6.

Heberden says, “ I never knew a certain instance of the gout beginning before the age of puberty\*. Sydenham, in speaking of the gout in females, is erroneous in stating that it attacks only aged women.” The disease does not certainly make its invasion so early in the female sex as in men; but it seldom waits the period of very advanced years: I have mentioned two cases, hereditary, beginning at fifteen; and I know another female who was attacked with gout at the ball of the great toe, at the age of eighteen. The fit was of tedious duration, and

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\* Commentaries, p. 33.



irregular in its progress. The disease was not known in her family; but in her structure, temperament, and some of her habits, there was abundant illustration of several of the causes of predisposition, of which I am now treating.

The following tabular view exhibits the period of the first attack in five hundred and fifteen cases :

At the age of eight.....	1
———— twelve .....	1
———— fifteen .....	1
———— sixteen.....	1
———— seventeen ....	1
———— eighteen .....	5
———— nineteen .....	3
Between twenty and twenty-five } years of age.....	57
———— twenty-five and thirty..	85
———— thirty and thirty-five ..	105
———— thirty-five and forty....	89
———— forty and forty-five....	64
———— forty-five and fifty....	54
———— fifty and fifty-five.....	26
———— fifty-five and sixty....	12
———— sixty and sixty-five....	8
At the age of sixty-six.....	2

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I have not myself witnessed many examples of a first attack before twenty; nor any one after sixty-six.

*Particular Bodily Conformation.*—It may be observed of gouty persons, that, for the most part, they are formed with a capacious circular chest; and that they

have large full veins, and loose solids. Even in those examples, in which the veins are small, they usually appear very much distended, when the gout is approaching. In relation to stature and bulk, I have made the following comparison in five hundred and eighty-six examples :

	<i>Males.</i>	<i>Females.</i>
Tall and corpulent. . . . .	92. . . . .	11
Tall and robust. . . . .	51. . . . .	1
Short and corpulent. . . . .	52. . . . .	17
Middle height and corpulent. . . . .	82. . . . .	9
Middle height and robust. . . . .	28. . . . .	3
Middle height and slight. . . . .	28. . . . .	4
Middle stature and bulk. . . . .	78. . . . .	2
Tall and middle bulk . . . . .	27. . . . .	1
Tall and slight. . . . .	24. . . . .	2
Short and middle bulk . . . . .	33. . . . .	1
Short and robust. . . . .	8. . . . .	0
Short and slight . . . . .	27. . . . .	5
	<hr/>	<hr/>
	530	56
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This statement confirms the observation of Sydenham, that the gout chiefly attacks the gross and corpulent; but his opinion, “that such as are liable to this disease have large heads;” and Cullen’s, that it attacks especially “men whose skins are covered with a thicker rete mucosum, which gives a coarser surface,” I cannot, from attentive investigation, discover to be founded in truth.

Of the sixty-four persons classed in the above calculation as short and slight, or of middle height and slight, forty-five had *hereditary* gout.

*Constitution and Temperament.*—I believe it may with truth be affirmed, that the gouty in general possess good constitutions, *abused* by habits of indulgence; and hence the familiar adage, “Gout is the disease of those who will have it.” A corpulent state\* of body usually precedes the invasion of the disease, and in many persons increases with its progress; but when its miseries are frequent and severe, loss of flesh, either partial or general, becomes a certain consequence; and this sometimes proceeds even to emaciation. On the *temperament* of gouty persons, Dr. Cullen remarks, “If, with the ancients, we might ascertain, by certain terms, the temperaments of men, I would say, that the gout attacks especially men of a *choleric-sanguine temperament*, and that it very seldom attacks the purely sanguine or melancholic. It is, however, very difficult to treat this matter with due precision.” I entirely accord with the author in the concluding part of this quotation. We should, notwithstanding, aim at greater precision in our terms, in relation to the subject of temperament, than is met with in the medical nomenclature even of the present day. The notions of the ancients on this point, together with their general opinions on disease, were so much obscured by the extreme doctrines of the humoral pathology, and so much blended with fiction and wild hypothesis, that in our practical language we necessarily cease to employ their terms; yet they are still retained in books, and without any method of improvement being attempted.

The term temperament, as an expression for the particular character and bias of the living actions, marked

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\* Corpulence is often such an excess of health, that it is really the beginning of disease.



in the original stamp of the constitution, and more or less evinced through life, is convenient in use and forcible in meaning; and at the same time that we reject a few of the ancient epithets, which were applied to the supposed morbid states of the blood and secreted fluids\*, we may preserve some arrangement on the subject with every advantage.

My present limits permit me only to be brief; but I would be tempted to propose a simple distinction into two kinds of temperament; the sanguineous, as designating that peculiar to persons in whom common inflammation is easily produced; and the *nervous*, as applying to those constitutions in which inflammatory action is excited with difficulty, but in which a morbid sensibility of nerve distinctly predominates; while the combination of the two in different proportions, may be denoted by the expressions, sanguineo-nervous, or nervo-sanguineous. Particular morbid tendencies I would express by the ancient term *diathesis* (διαθεσις), signifying disposition, as gouty diathesis, bilious diathesis, dropsical diathesis, &c. The term *melancholic*, though physically to be referred to the structure of the nervous system, may be applied with propriety to the mental disposition; and to this term may be contrasted that of *lively*, that is, possessed of vivacity. The terms *irritable* and *nervous*, as applied to the nervous system at large, are very synonymous in their usual acceptation; but probably it would be correct to apply the term *irritable*, to the morbid sen-

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\* Hippocrates conceived that there were four humours in the body; blood, bile, black bile, and phlegm; and hence, accordingly as one or other of these humours was considered to abound in an individual, he was said to be of a sanguineous, bilious, melancholic, or phlegmatic temperament.

sibility of nerve which is associated with quickness and vehemence of temper, and energy of mental action; and that of *nervous*, to the association of a *similar* state of nerve, with irregularity of spirits and more timidity of mind.

Gouty persons exhibit, in the full and dilated state of their veins, strong marks of a stimulated circulation connected with weak vessels: and I concur with Dr. Cullen in the opinion, that they possess a mixed temperament. Even in the acute state of the disease, they can employ powerful stimulants (although such stimulants are always improper), without the same degree of injury, or the same certainty of producing it, as would follow in most kinds of inflammation. They are usually highly irritable and nervous, not only from being so rendered by the sufferings of the gout; but, for the most part, from the influence of their original constitution.

*The Male Sex.*—The comparative infrequency of the gout in *females*, naturally suggests the inquiry—Whence does the male sex derive its peculiar predisposition to the disease, if its greater frequency in them really arise from a stronger predisposition? But if not, what other causes for this fact can be assigned? The more common occurrence of this disease in men than in women, must, without doubt, be principally referred to the chief remote cause, excess in living, and especially excess in wine, being applied in a greater degree by the former. But, in addition to this circumstance, the superior delicacy of the female structure and habit, puts some restraint on the acquirement of that peculiar plethoric state of vessels which appertains to gout, and which is in alliance with the inflammatory diathesis. The actions of the uterus are not without effect in counteracting a gene-



ral redundancy of blood\*. A gout of imperfect development, or of a chronic form, is more common in women than in men. It is of unfrequent occurrence in the former, unless with the concurring influence of strong hereditary predisposition. In the few exceptions which do occur to this general rule, we meet with the circular chest, large full veins, relaxed solids, and tendency to corpulency, which have been already described as prevailing in gouty men.

*Station of Life, and Occupation.*—Sydenham, speaking of the calamity of the gout, says, with equal modesty and beauty of expression, “ But what is a consolation to me, and may be so to other *gouty* persons of small fortune and slender abilities, is, that kings, princes, generals, admirals, philosophers, and several other great men, have thus lived and died. In short, it may in a

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\* Hippocrates gives an aphorism on this subject (Aph. xxix. sect. vi.), which is usually thus rendered. *Mulier non laborat podagra, si non menses ipsi defecerint.* In the Medical and Physical Journal, No. 214, the Reviewer has called in question the accuracy of my interpretation of this aphorism. He attaches to the word *defecerint*, very improperly as I think, the literal signification of *deficient*, considering it as a comparative expression. To me it appears clear that the Greek word in the aphorism *ἐκλιπη* signifies *dereliquerint*, or having left entirely. Those females who suffer gout are such as are very liable to *menorrhagia*, and have the gout either at the early part or about the middle of life; or those who have been so liable, and have the gout come on a few years, sooner or later, after the final cessation. It is at the latter period that the gout most occurs with females; and to this, I think, the aphorism is intended to apply.



more especial manner be affirmed of this disease, that it destroys more rich than poor persons, more wise men than fools; which seems to demonstrate the justice and strict impartiality of Providence, who abundantly supplies those that want some of the conveniences of life with other advantages, and tempers its profusion to others with equal mixture of evil; so that it appears to be universally and absolutely decreed that no man shall enjoy unmixed happiness or misery, but experience both: and this mixture of good and evil, so adapted to our weakness and perishable condition, is perhaps admirably suited to the present state.\*”

Since the period at which these sentiments were entertained, luxury has so much increased throughout the whole community, that the gout sometimes finds entrance even into humble dwellings. In London, amongst the inferior classes, I have observed butchers, innkeepers, butlers and porters in wealthy families, to be very subject to gout. It is also frequent with coachmen, chiefly such as live in families; for, together with much excitement from liquors, they are constantly exposed to the variations of the weather. In short, such stations and occupations as most induce repletion and inactivity; or, habits of full living with only passive exercise, lead to gout; and even in some constitutions, in which there is a great tendency to plethora and corpulency, moderate indulgence in diet, notwithstanding active exercise, seems to implant the disposition to the disease.

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\* In a similar spirit of moral reflection, the Poet happily expresses himself:—

“ O fortunatos nimium, sua si bona norint

“ Agricolas !”—

*Georg. II. 458.*

*State of Mind.*—The influence of the passions on the bodily health we know to be at all times powerful; but as far as respects the gout, I think that the depressing passions have the strongest effect. Grief and anxiety impair the healthy energy of the brain, primarily; and affect the digestive functions, the circulation and secretion of the liver, and the actions of the intestinal canal, in a secondary manner; thereby, in a gouty diathesis, predisposing to the disease.

*Severe Study.*—This cause, comprising not only want of exercise, lateness and irregularity in the hours of rest and sleep, but also its consequences, weakness of stomach, and inactive bowels; by its effects on the nervous system, from the over-action of the brain, produces that form of irritative debility, which increases the susceptibility of the frame to disease, and consequently to gout, if such be the predisposition of the individual\*. Sydenham mentions that his immoderate application to the composition of his *Treatise*, occasioned him the severest fit of the gout which he ever had†.

One gouty gentleman, of plethoric habit, informs me that if he allows himself to read with any intensity of attention, or for a long continuance, he experiences the same kind of giddiness which he suffers from stooping. In this case we may conceive that more or less of congestion takes place in the capillary circulation of the

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\* The late Mr. Pitt and his father had gout at a very early period of life. The father was never a votary of Bacchus; of the son, this could not be strictly said; but both were *ardent students*.

† Dedicatory Epistle to Dr. Short.

brain; for this very vascular organ, when under extraordinary exertion, must receive a more than usual supply of blood.

*Animal Food.*—This, when taken in excess of quantity, not only weakens the stomach by distention, but stimulates and oppresses the whole digestive process, beyond its healthy power. In the form of high-seasoned dishes, it proves a cause of morbid excitement, and induces such a false degree of appetite, that a quantity sufficient for several meals is often comprehended in one alone. An improper amount of quantity in the twenty-four hours, however divided, serves very materially to lay the foundation of a plethoric state; but in order that the gout may be excited, the influence of fermented liquors must be superadded.

*Strong Liquors.*—Of these, in relation to the gout, wine, if in excess, is certainly the most injurious. The use of raw spirits destroys the appetite, weakens the tone of the stomach in a permanent manner, and even leads to disease of structure; so that although an inflammatory condition of vessels is produced, the *plethora ad molem*, as it has been called, is counteracted. Wine contains so much more of alcohol in a given bulk, than malt liquors possess, that it is probably from this cause, and at the same time from its not breaking down the energy of the stomach as spirits do, that it proves so active an agent in introducing the gout. Much of this effect also depends on the kind of wine which is taken, as the gouty know by constant experience. Champaign, bad claret, and new port, will predispose to the gout much more strongly, than equal, or even larger quantities of madeira and sherry; because, in addition to their equal or greater



heating effects, they give rise to more acidity; from which the stomach and alimentary canal suffer certain irritation. In a system, otherwise fitted for gout, or in the settled gouty habit, the limbs quickly suffer by sympathy. The light wines and acescent liquors made from our own fruits, contribute to the gravel rather than the gout; and raw spirits more particularly induce severe dyspepsia, obstructed and hardened liver, and dropsy. In comparing the influence of different liquors, it must be considered, that wine-drinkers also partake much more largely of the solid luxuries of the table, than drinkers of spirits and malt liquors can do, and therefore produce more powerfully the combined effects of heating excitement and redundant assimilation. Dr. Rush, contrasting the diseases and remedies amongst the Indians of North America with those of civilized nations, makes the following observations: "I have heard of two or three cases of gout among the Indians, but it was only among those who learned the use of rum from the white people. A question naturally occurs here, and that is, why does not the gout appear more frequently among that class of people, who consume the greatest quantity of rum among ourselves? To this I answer, that the effects of this liquor upon those enfeebled people, are too sudden and violent, to admit of their being thrown upon the extremities, as we know them to be among the Indians. They appear only in visceral obstructions, and a complicated train of chronic diseases. Thus putrid miasmata are sometimes too strong to bring on a fever, but produce instant debility or death. The gout is seldom heard of in Russia, Denmark, or Poland. Is this occasioned by the vigour of constitution peculiar to the inhabitants of those northern countries? or is it caused by their excessive use of spirituous liquors, which produce the same chronic

complaints among them, which we said were common among the lower class of people in this country? The similarity of their diseases makes the last of these suppositions the most probable. The effects of wine, like tyranny in a well-formed government, are felt first in the extremities; while spirits, like a bold invader, seize at once upon the vitals of the constitution."

I saw lately a corpulent and robust man, aged thirty-four, labouring under very severe gout, for the fourth time. Both feet were affected. It was entirely acquired, and began at the age of twenty-nine. In the earlier part of his life, he had been constantly on the sea coast as a smuggler, and at the same time that he was exposed to the hardships of that irregular life, he drank two or three pints of hollands a day, during the long period of four or five years; with no other effect than being rendered very nervous, and occasionally dyspeptic. Afterwards, he became a bricklayer; and, being possessed of property, indulged himself both in wine and porter, in addition to a slight use also of spirits. His exercise was much less active than formerly, and after about two years of this new mode of living, the gout came as the result.

In another instance also of a very similar kind, the patient, until he was twenty-eight years of age, led a country life, in a situation where he drank hollands freely and constantly. He then took the place of a butler in London, and entered upon the usual inactive habits of that situation, in concurrence with indulgence in wine and strong malt liquor, and abundant eating. His present age is fifty-nine; and during the last twenty-four years, he has not in any one year escaped a severe attack of gout. In this case, as in the former, the gout was unknown in the family; and each patient was of the



make and temperament, which I describe, as the most predisposing to the disease.

Van Swieten states\*, that the Dutch knew little of this disease till they changed their favourite beverage beer, for wine. Linnæus informs us, that the Laplanders and many country people in Sweden, who drink malt spirits, but never wine, are strangers to the gout†.

I am disposed to think, that in this country, and particularly in the metropolis, gout is much increased in frequency among the lower stations of life, since the very general and free use of porter. This is a very nutritious fluid, and, in conjunction with spirits, even with a moderate quantity of solid food, may be viewed as inducing the plethoric inflammatory state, and becoming therefore a consequent introduction to gout.

In Scotland, gout is much more rare than in England. In Edinburgh, where the habits of the people approach the nearest to those of London, it is found most; but it is scarcely ever known among the inferior classes. In two thousand two hundred cases of diseases admitted into the Royal Infirmary as clinical patients under the care of Dr. Gregory, there were only *two* examples of gout. I also learn that Dr. Hamilton, who has been one of the physicians of the infirmary nearly thirty years, and must in that course of time have admitted many thousand patients, has not seen more than two cases of gout, out of the total number of diseases under his care in that Insti-

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\* Commentaries, 1255.

† Mr. Good, in his profound and interesting work on Nosology, observes, “Gout is one of the maladies which seems to have been common to England in its earliest ages of barbarism. It is frequently noticed by the Anglo-Saxon historians, and the name assigned to it is fot-adl (foot-ail).”



tution. In the London hospitals, on the contrary, according to my recent inquiry, gout is not so very uncommon; although, as it is not usual to admit cases of gout, its frequency in the list of hospital patients, must not be expected\*.

In Glasgow the gout is very rare, even amongst the higher classes; and, in connection with this fact, I may mention the following circumstances. Amidst a population of about 110,000 persons, which Glasgow, and its

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\* In the first edition of this Treatise, I committed a remarkable mistake with respect to gout, in my reference to the valuable paper in the Medico-Chirurgical Transactions, "On the comparative Prevalence, Mortality, and Treatment of different Diseases; by Sir Gilbert Blane, Bart." The cases of gout, which I incorrectly stated as being in the list of the hospital patients, occurred only in the private practice of this physician; as the following quotation shews: "The diseases which stand most prominent for their prevalence among the upper classes of society, are gout, disorders of the stomach, and liver complaints. With regard to gout, there is not a single case of it to be found in the hospital list, whereas there are in the private list one hundred and thirty, constituting about a twenty-sixth part of the whole. No disease affords so strong a proof of the power of habits of life over health."

The calculation of Sir Gilbert's hospital practice, refers to the years from 1784 till 1794, and comprehends the number of 2406 patients. For the reason which I have suggested, it must not be concluded, that gout does not occur amongst that class of persons, who are admitted into the London hospitals with other diseases. At the same time, I grant entirely, that the prevalence of gout in the respective classes of society, proceeds in an exact ratio with the freedom used in animal food, strong liquors, and general indulgencies. The remainder of my argument I have already offered.

environs comprehend, there are not, as far as I could learn, twenty private carriages in use. The demand for hackney coaches is so small, that the proprietor has found it necessary to discontinue the regular stand, and the whole number of them does not exceed four or five. Sedan chairs are in common use with the ladies, but the gentlemen prefer the wholesome exercise of walking; and, as this city does not rank inferior to any other in liberal hospitality, the infrequency of gout must, in great measure, be imputed to the greater comparative activity of the people, and better regulation of the general habits, than belong to London. In Glasgow, also, punch is a more general beverage at the best tables than wine. Hence I often heard it facetiously remarked, "that punch keeps off the gout." It may certainly be said, that weak acidulated punch is much more diuretic than wine, and less heating in its effects. But although the argument may be maintained, that punch does not induce a predisposition to the gout, no one would deny that a free indulgence in this liquor must impair the healthy powers of the stomach, and may lead to some serious disease. The lower orders in Scotland, who drink whiskey freely, and live chiefly on farinaceous and vegetable food, acquire severe dyspepsia, liver disease, and dropsy, or diabetes\*; but seldom, or never, the gout.

*Indolence* powerfully assists the predisposition to

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\* I am led to believe, from attentive observation, that *Diabetes* is considerably more frequent in Scotland than England; and that the opposite habits of the people in these two countries, such as I have described, tend, in a sort of respective ratio, to produce gout with the one course of life, and diabetes or dropsy with the other.



gout. It promotes the tendency of full diet to produce plethora, by its restraining the various excreting functions: and also prevents that regular distribution, and due expenditure of the nervous energy, which the healthy action of the brain, and the several secreting organs, demand. It may be said to cause a morbid accumulation of nervous excitability.

Of facts, directly to illustrate the influence of the predisposing cause now under consideration, I might offer an ample list; but the following examples will be sufficiently in proof.

A gentleman, whose aunt only in his family had gout, of strong constitutional predisposition to the complaint, was first attacked at the age of thirty-five, when he was filling the situation of a school-master in the country. His usual habit was to take animal food freely both at dinner and supper, with malt liquor, and either a small portion of wine, or a glass of mixed liquor. He described himself as carefully moderate in the use of liquor. The gout returned severely at short intervals. Soon after this he had occasion to travel into Ireland during a period of nine months, and drank both wine and whiskey very freely; but his exercise was exceedingly active, and he was free from gout. Resuming again his sedentary life, although with more care than formerly in his habits, the gout soon came back with violence; and in the course of its progress, has affected the feet, knees, ham-strings, hands, and elbows. A similar example has lately come before me. A school-master, extremely zealous in the discharge of his duties, of large frame, circular chest, very plethoric, having invariably a good appetite, and indulging to the extent of eating heartily of animal food at dinner and supper; temperate in vinous and spirituous liquors, but every day partaking of one or the other in



some degree, and rather freely of grateful malt liquor; so sedentary as to pass days and weeks without exercise, even when well; became gouty at the age of twenty-four, the disease being unknown in his family. I have seldom seen a greater martyr. His fits, and the distressing consequences, have sometimes been of six months' continuance.

An officer, whose grandfather only in the family had gout, had been subject to severe attacks twice every year. He was employed on very active service in Ægypt, for nine months, and often lay out on the sands, protected only by carpets, the nights being cool and the days hot. He drank both wine and spirituous liquors very freely, and much more so than before or since; but his bodily exertions were excessive, and his mind was enthusiastic in his duties. He was quite free from gout. Leaving this station, he went to Gibraltar, and there becoming very inactive, in the course of three months, the disease returned with all its violence; and has ever since affected him severely, twice a year, as before.

*Plethora*.—A redundancy of blood in the general system, is certain to be a result of the combined influence of the three preceding remote causes; and appears, as far as I have observed, to be the condition most preparatory to the operation of the exciting causes. That form of plethora which is connected with congestion in the circulation of the liver, may certainly be considered as peculiarly concerned in the production of gout.

*Nimia Venus*.—From this cause, the nervous energy becomes unduly exhausted; much irritative debility is produced; and the digestive functions, together with the general powers of the system, are disordered. Habits

of indiscretion, in this respect, are so constantly joined with the gratifications of the table\*, that indirectly it may be considered a predisposing cause of gout. Sydenham describes this cause, as giving “the seeds of the gout;” and this position has some little truth; but I conceive that the agency which brings the disease forth, consists in the associated habits of living. Voluptuous passions, and the excesses of the table go hand in hand; and many of the gouty are too correctly characterized in the Greek and Latin epigrams just quoted.

*Climate, Season of the Year, and State of the Atmosphere.*—Although no climate can exempt the gouty constitution from the disease, if too indulgent habits of living are pursued; yet, a hot climate, by the copious and regular perspiration which it induces, furnishes, I believe, but comparatively few examples of the first occurrence of gout. I have met with some rare instances in which I learn that the disease has first taken place, wholly acquired, without hereditary influence, both in the East and the West Indies; and, more frequently, I have been consulted by patients who inform me that they had several of their attacks while residing in one or other of these climates. All such individuals have

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\* The gout was saluted by the Greek poets as the daughter of Bacchus and Venus:

“Αυσιμελου Βάκχου, και λυσιμελους Αφορδίτης,

“Γέννασαι θυγάτηρ, λυσιμελής, Ποδάγρα.”

And in the same sense runs the Latin verse:

“Ut Venus enervat vires, sic copia vini,

“Et tentat gressus, debilitatque pedes.”



been inconsiderate in the use of wine and rich living. Others, and certainly the more careful, have profited very much by the influence of a hot climate.

Long continued heat of weather is favourable to a few constitutions, and particularly to those in which rheumatism occurs in conjunction with gout; but if I judge from the summer of 1818, it does with the majority rather predispose to gout; and much more especially it has had this unfavourable effect, with those persons who have been confined by their pursuits in the metropolis, and scarcely enjoyed the beneficial change of country air. It has appeared to me that the body has acquired a feverish condition, together with some debility, from the excitement of a constantly hot atmosphere, to which, it may be said, our English dress, and houses, and customs, are not suited. Exercise is taken with less inclination and less advantage, than in more temperate weather.

In the intense heat of June 1817, I witnessed both the predisposing and exciting operation of this state of atmosphere on gouty persons.

Variable climates certainly have great influence in predisposing the body to gout; and locality of situation has a powerful operation; so that the gouty patient sometimes finds himself compelled wholly to change his place of residence, for one which is dry and protected.

Changeable weather, and especially in spring and autumn, when cold winds prevail with frequent wet, acts very strongly on the gouty diathesis; and causes almost habitual achings, and increased stiffness in the joints which have been affected; also predisposing the system to a paroxysm. The regular functions of the skin, so important to health, suffer material interruption; and hence, the chief explanation of the ill consequences which ensue.

Some naval gouty patients inform me, that they have



not been more free from gout, when at sea, than on shore. They state that they have been much more inconvenienced in regard to a confined action of the bowels; which circumstance ranks so pre-eminently in the list of predisposing causes.

*Local injury.*—I must advert to this circumstance as regards the particular part most liable to be affected in the first fit. If the ankle, knee, or other part shall have suffered from a strain or any kind of injury in early life, that part becomes very remarkably the chosen seat of gout in its first invasion; and when such part is ever affected, the effectual recovery of it from weakness and lameness, is often rendered tedious and difficult.

#### A MORBID STATE OF THE DIGESTIVE ORGANS, CONSIDERED BOTH IN ITS PARTICULAR RELATION TO THE GOUT, AND IN A GENERAL VIEW.

WHEN we consider that gout is truly a disease of repletion, it follows as a necessary consequence, that the over-excitement of the stomach and chylopoetic functions must lead to relative derangement and debility. Sydenham observes, “that upon a thorough attention to the various symptoms of the disease, he judges it to proceed from a weakened concoction both of the solids and fluids.” This is synonymous with the more modern language of unhealthy assimilation, which in quantity, and probably in quality, may be viewed as the parent source of the disease. It is in this, that the acquired predisposition, or that *not hereditary*, consists; and in most instances, the hereditary predisposition is aggravated by the same cause, before any developement of gout takes

place. In a first fit of gout, and sometimes also in subsequent attacks, there is no very sensible disturbance of the digestive organs; but it does not follow that they are really in a state of healthy action. The patient judges only from partial indications. An active appetite is often joined with an unhealthy state of stomach, and particularly with an unequal performance of functions below this organ, after the food has undergone its first change. In the case of the *epicure*, there is much of artificial appetite produced by the habitual and excessive gratification of the palate. The patient is often deceived into a belief, that being possessed of appetite, and apparent powers of stomach for the enjoyment and benefit of a hearty meal, his digestive organs cannot be in fault. But we must keep in view, that in the stomach itself, the important process of digestion only begins. Its next stage, and a very material one it is, takes place in the duodenum, and comprises the proper secreting action of the liver, and the healthy influence of the bile. The due excrementitious function of the bowels, constitutes also an essential part of the process towards healthy chyli-fication; and it may be fairly concluded, that upon the correct performance of these preparatory steps, the subsequent healthy and complete assimilation of the chyle into blood, will greatly depend. A morbid interruption to any part of the train of digestive functions, may become a predisposing or an exciting cause of gout, in the same manner as it is a cause, which commonly exerts an influence in all other diseases.

The particular symptoms which arise, will, on accurate examination, generally indicate, with considerable fidelity, the particular seat of morbid action. On this head, I shall endeavour to offer some remarks, taking a general view of the subject.



When the stomach is the most affected part, the marks of indigestion are felt in the most sensible manner, by some or all of the following symptoms:—Heartburn; eructations which are sour, attended with a sense of heat, and often conveying the odour of yesterday's meal; a craving appetite, which does not become comfortably satisfied; oppression after a meal, with a painful sense of distension, and soreness of the whole epigastric region. This sense of soreness is sometimes experienced in so extreme a degree, that only slight pressure from dress can be allowed; and even a gentle touch at the ensiform cartilage, or just below that part, is dreaded by the patient as an act of violence. Perhaps a very slight meal causes a sense of fulness and distressing oppression: the patient feels inflated, or, to use his own descriptive language, *blown up*. This happens particularly if he partake with any freedom of vegetables. Sometimes indeed the smallest portion of vegetable disagrees in this manner. Such an irritability of the stomach prevails, that even much bodily exertion will bring on vomiting; and nausea and slight sickness are readily induced. The abdominal muscles are irritable and convey the feeling of great rigidity upon examination. To this account may be added, a furred tongue and clammy state of mouth; with viscid saliva, which is experienced especially in the first of the morning. Its taste is often remarkably saltish. There is a troublesome thirst. In dyspeptic persons, in whom the nervous temperament predominates, the tongue is coated either with a white, or yellowish white fur: but in those of the sanguineous temperament, the colour of the fur is a deep brown; or brown mixed with white. In the former class of patients, the complexion of the tongue is very commonly pale; in the latter, quite red. But of all the appearances of the tongue, which



indicate a debilitated state of the stomach in its greatest degree, is the cherry-red colour of the whole surface, with more or less of cracks in its substance, and a prominence of the papillæ. By these last characters, the pale tongue also, after a long duration of dyspepsia, is sometimes distinguished, and is to be considered as giving a very unfavourable evidence of the weak powers of the stomach. An extremely clean tongue, with streaks of white and red, is another distinct appearance, as the index of debility. Accordingly, as the nervous irritation prevails in the general state of the constitution, a frothy appearance of the tongue and fauces, may, in addition to what I have above described, be noticed. Nausea, occasional sickness, flushings after eating a stimulating meal, a giddiness on sudden change of posture, and an uneasy or painful state of head, also occur. With this dyspeptic condition of stomach, the bowels are irregular, but for the most part torpid.

Many patients relate that the only predisposing circumstance as introductory to a fit of gout, to which they can make reference, has been a costive state of bowels. The secretion of the urine is variable, both in its quantity and in its properties. Sometimes it is deficient in quantity, of a deep colour, and of high specific gravity; at others, abundant, pale, and much diluted; in which case it is passed with much nervousness and irritation, but without difficulty.

When the stomach itself is primarily affected, in addition to the immediate symptoms which mark the disturbed œconomy of that important organ, we have to remark that the patient becomes thin, and is altogether in a nervous and irritable state. So much indeed is the condition of the nervous system associated with the state of the stomach, that when its energies are much impaired, the mind itself seems to lose its balance of

power. In more physiological language, the sympathetic connexion between the brain and the stomach, so intimate and essential, is strongly exemplified.

When the chief seat of complaint is below the stomach, the tongue often bears an almost healthy appearance, and the appetite is strong, and for the most part regular. Instead of a loss of bulk, we may often observe in this case, that the patient has increased in size, but especially in the abdomen. The muscular fibre is relaxed, and there is altogether a morbid fulness of habit. The symptoms are occasionally such as are in common language called bilious ; with which a general sallowness, or partial stains of yellow in the skin, and a dark colour around the lower eye-lid, are more or less associated. While indigestion thus takes place in the intestinal canal, the stomach itself appears to be in too strong action, and prepares more food than can be afterwards converted into good chyle, and assimilated into healthy nourishment. I have met with instances among persons subject to gout, in which the functions of the stomach alone have been much improved by medical treatment, so that the digestion which was formerly weak, has become sensibly stronger ; yet, from the subsequent process not being healthy, the good appetite has led to a false nourishment of the body, and frequent fits of gout have ensued. All the secretions become vitiated. The bowels suffer much irritation, being often affected with painful excitement, fruitless of relief, and occasionally amounting to tenesmus. The peristaltic action is irregular ; the fæces have an unnatural consistence and colour, and are peculiarly offensive. Very commonly they are frothy, and of a greenish colour. Sometimes they are passed as *pellets*, and of a light colour ; and when more formed by the bowel, it occurs, not unfrequently, that



they are so contracted in size as to convey the apprehension of some stricture of the canal; but the effect appears to be really owing to the unhealthy state of the secretions, and to muscular contractions of the bowel irregularly occurring from irritation. It sometimes happens that air is formed so abundantly in the intestines, either from undigested aliment, or possibly, in part, from actual secretion, that its effects in producing painful distention, alone serve to cause a most distressing state of complaint. The discharges are commonly not formed, but are remarkably tenaceous. They assume the appearance of pitchy blackness, or are muddy, or resemble dirty clay, or a mixture of fuller's earth and water; and when the complaint has been of long continuance, an excessive quantity of mucus is secreted in the intestines, which incorporates itself with the fæces, and sometimes exhibits almost the appearance of purulent discharge\*. This mucus is to be distinguished from the gelatin-like appearance, which is seen occasionally in the evacuations, when the bowel suffers excessive irritation from an acrid purgative, or when under dysenteric affection; in which case, it appears detached from the fæculent matter, possesses a firm consistence, and differs much from the slimy accumulation before mentioned. This habitual mucous secretion has always appeared to me an indication, that the morbid condition of the alimentary canal has been of long standing. In the same manner we see the urine loaded with mucus, when the bladder is diseased, or under permanent irritation from a morbid condition of its contents.

Respecting the secretion of the mucous membrane of the bowels, I must further advert to that morbid action, in which the peculiar discharge, though frequent, is not

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\* If water be poured on these fæces, the mucus separates into small flakes.



constant. It has the appearance of being very firm in its texture, and now and then, for several inches in length, is really a complete cast of the bowel. The most remarkable case of this description which has come under my observation, was attended with a morbid action of the vessels of the liver, which had been of long standing. The bile was of the most vitiated and acrimonious description, and I conceived that the increased action of the mucous membrane was in the first instance a salutary effort of nature to procure a defence to the surface of the intestines, but had proceeded to an unfavourable extent. The bowels were more remarkably insensible to the influence of strong purgatives than I had ever experienced in any case; and especially when this dense mucus was abundant.

I have found, in two instances, a discharge from the bowels of a substance very much resembling grains of white sand. In each case the liver was irregular in its office, and the whole of the digestive functions were considerably disordered. I made a particular examination of one of these specimens, and the following were the results :

In external character, whitish, shining, and granular, the grains being larger than those of ordinary white sand.

1. Being heated in a platina spoon, it blackened and exhaled an ammoniacal and animal odour. The muriatic acid stopper held over the heated matter, produced dense white fumes of muriate of ammonia.

2. Submitted to the action of diluted muriatic acid, it dissolved by the assistance of heat without effervescence, leaving a very small portion of residue.

3. By diluted nitric acid it dissolved to the same extent. This solution became decomposed both by nitrate of lead,

and by pure ammonia; the former indicating the presence of phosphoric acid, the latter of phosphate of magnesia.

4. The liquor being rendered neutral by pure ammonia, oxalate of ammonia was added, without causing any precipitation. Hence is proved the absence of lime.

5. The insoluble residue treated by a boiling solution of caustic potash was dissolved. To this solution diluted muriatic acid was added, and the mixture was evaporated to dryness. From the addition of distilled water, a matter was separated, which was evidently silicious.

The substance in question consists therefore of ammoniaco-magnesian phosphate; a small portion, certainly less than a 20th, of silex; and a small quantity of adherent animal matter.

In investigating a disordered state of the digestive functions, frequent observation of the excretions is an essential source of information to the practitioner. Mr. Abernethy, in addition to his original and highly instructive views of the present subject, has laboured very usefully in exciting among the profession an increased attention to these points. He observes, that "the colour of the alvine excretions in a disordered state of the viscera is various. Sometimes they appear to consist of the residue of the food, untinged by bile. Sometimes they are of a light yellow colour, which denotes a very deficient quantity of healthy biliary secretion. Any kind of brown which dilution will not convert into yellow, I should consider as unhealthy, since the colour of healthy bile is a bright yellow, which by concentration appears brown\*."

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\* On the Constitutional Origin and Treatment of Local Diseases, p. 35.



It may be stated, that a bright yellow appearance indicates a fresh and hurried secretion of bile, and shews irritation rather than regular healthy action. A clay-like appearance is a sure indication of an obstruction of the bile, and that it does not enter into the duodenum; and when the opposite colour is seen, sometimes to the degree of pitchy blackness, we may conclude, that not only the bile in particular is in a most unhealthy state, but also, that the secretions of the alimentary canal itself are much disordered. Another evidence of a wrong action of the liver, is very frequently found in the greenish appearance of the discharges from the bowels; proving unequivocally a highly vitiated state of the bile. With this there is often further attendant proof of derangement in the general secretions of the canal. It is objected by some, that conclusions drawn from the observation of the excretions are fallacious, because many of the appearances that have been mentioned, will be produced occasionally in healthy persons, from irregularities in diet. In answer to this, it may be affirmed, that such persons will have their feelings of comfortable health and tranquillity disturbed, in however transient a manner, when the alimentary secretions thus become vitiated. The occasional hypochondriasis which is experienced by many who enjoy general good health, will, I believe, on examination, most commonly be found connected with the faulty state of the digestive organs, and corresponding indications in the appearance of the excretions.

I must repeat, that the care to be informed, by actual and repeated observation, of the state of the several secretions, is most assuredly, in many cases, quite indispensable towards forming a correct medical judgment.

More or less of jaundice usually accompanies the most urgent state of the disordered functions which I have just



described; and in proportion to the degree of this evidence, the nature of the complaint is apparent to common observation.

I have known in several instances, that a dyspeptic and bilious state of complaint has occurred as a preliminary, many weeks before a first attack of gout; and in such instances the patient has found himself gradually becoming larger in the abdomen; oppressed at the stomach; and affected with many nervous sensations. Very lately, I saw a gentleman labouring under a first fit of gout, who, for two or three months before, had suffered from an obstructed state of liver, with many attendant symptoms of derangement in the stomach and alimentary canal. So strongly was his nervous system affected, that, together with flutterings near the heart, and occasional palpitation, he was frequently seized with almost a loss of sight when walking in the street. Sometimes objects appeared double; and much dimness of sight occurred on the slightest occasion. The whole of this sympathetic defect of vision yielded to a course of medicine; of which, mercurial purgatives formed a material part. Returning to some freedom of living, before the complete correction of the internal functions was produced, the gout arose.

In another case, attended with very similar symptoms, almost every attempt to stoop, as in the act of adjusting the shoes, was instantly followed by that sudden spasm of the diaphragm, which the patient describes as the cramp in the stomach. This symptom occurs chiefly with very corpulent persons; in those especially, in whom the nervous temperament predominates; but it also occasionally affects others, whose temperament is sanguineous. Thus it sometimes happens to the gouty patient, that when he is most complimented on his florid looks, and good appearance, the disease is making its insidious approach.

In such instances, I have invariably found that unhealthy corpulence about the abdomen has been gradually forming, and, in other words therefore, a state of congestion in the vena portarum system.

In those who have had frequent attacks of gout, the occurrence of urgent premonitory symptoms may be said to take place, chiefly in proportion to the degree of the abdominal visceral derangement previously existing.

From the connexion by structure which exists between the diaphragm and abdominal viscera, and the liver especially, the respiration is very commonly imperfect, and, in some instances, even difficult and painful, on every occasion of increased exertion, when a morbid condition of these parts is existing in any considerable degree. This disturbance may be produced in a transient manner, from the influence of disordered functions simply; or, may be the more permanent result of altered structure of contiguous parts.

I have seen the sympathetic affection of the diaphragm, in one case, amount to so great a degree of spasmodic asthma; attacking the patient periodically, at first twice, and afterwards once in the twenty-four hours; that each paroxysm was dreaded with horror, from the fear of suffocation. It was of three or four hours' continuance; and until active treatment was adopted, the attack followed with certainty, and almost instantly, "the least incaution either in the quantity or quality of the dinner meal.

One gentleman relates, that for a considerable time previously to his last severe fit of gout, he not only complained of oppressive abdominal corpulency, which had been slowly coming on, but also of the sensation of a strong cord across the epigastric region, just below the diaphragm; causing very great stricture of his breath in stooping.



In the dyspepsia of gouty persons, both in consequence of their temperament, and from the established influence of the gout on the nervous system, the severest state of hypochondriasis sometimes prevails. Under such circumstances, the connexion of the functions of the brain with those of the digestive organs, is particularly exemplified; and a striking picture is seen of the reflected and mutual influence, which prevails between the mind and the body in disease. When that state of the system is taking place which is introductory to the return of the gout, the bowels fail in their regular action; the secretion of the urine is variable in quantity and in appearance; the patient becomes sensible of enlargement in the abdomen, while the limbs sometimes are shrunk, and the muscles are soft; he complains of various nervous feelings; and is occasionally troubled with night-mare, and with cramps.

Dr. Cullen, in describing the atonic state of gout, remarks of the affections of the alimentary canal, "that they are often attended with all the symptoms of hypochondriasis; as dejection of mind, a constant and anxious attention to the slightest feelings, an imaginary aggravation of these, and an apprehension of danger from them\*."

The active sympathy which exists between the stomach and the limbs, in certain states of chronic gout, I shall hereafter have to consider.

Under a disordered state of the digestive functions

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\* I have had occasion to observe that the dyspeptic invalid finds the morning his most healthy and comfortable time; but that, on the contrary, the truly nervous patient is wretched through the day, and re-animated only in the evening, by the influence of dinner, stimulants, and cheerful society.



(whether the patient is gouty or not), and in proportion to the duration of complaint, and its dependance on change of visceral structure, the symptoms which arise from sympathy of distant parts, or contiguous organs, are strongly and variously marked. In addition to palpitations, an occasional disposition to fainting, and other symptoms already described, I may mention, as another effect of the morbid sensibility of nerve which is prevailing, a remarkable tendency in the nerves of the arms and legs to be affected with numbness, both by day and night, on the application of very slight pressure from accidental posture; and the patient also complains of disagreeable tinglings, which usually most affect the fingers.

The bowels are frequently distended with undigested food, and with the air which is generated in consequence; so that many uneasy sensations are felt through the whole tract of the canal, which sometimes assume the character of spasm.

Flatus in the stomach and bowels, or in the bowels alone, is now and then the sole symptom of indigestion, of which the patient confesses himself sensible; and this is, perhaps, detected only on attentive inquiry: but it may be received as a sufficient proof of an unhealthy condition of the digestive powers. In this case, the stomach and bowels are very deficient in muscular tone, and a full meal with certainty occasions a distressing feeling of weight, and general distension; which latter symptom is sometimes very painfully oppressive.

The hæmorrhoidal veins are occasionally painful; and a discharge of blood, which in some persons is quite irregular, and in others is almost periodical, very commonly accompanies the gouty diathesis. The discharge in question sometimes occurs very profusely, and is of a dark venous colour, or of a blackish hue. When the hæmor-

rhage is slight, it is more usually arterial, and of a florid red. It may continue in this moderate degree, and not prove injurious; or it may be the commencement of an evil which I shall presently describe.

A discharge of blood from the hæmorrhoidal veins may always be considered as a salutary depletion, and should be viewed as an intimation from Nature that the bowels should be more attentively regulated. It is usually a consequence of pressure on the veins from a loaded state of the rectum; by which the free return of blood into the vena portarum is prevented. Wholly different from this venous discharge, is the arterial loss of blood which occurs with some persons who suffer from piles. This is an active hæmorrhage, and, when sudden and profuse, may at once place a delicate patient in some danger of life. No constitution can permanently resist its debilitating influence, when long continued. It is, therefore, always incumbent on the physician to inform himself of the true character of hæmorrhage from the bowels; lest, by an oversight, he should sanction the encouragement to a supposed salutary effort of Nature; when, in fact, there is taking place such a drain of the vital fluid, as must undermine the best powers of the constitution.

As I shall relate some well-marked cases of this description, I will not in this place prosecute the important subject.

The local abdominal sensations vary according to the parts most affected. It is difficult, however, to fix on the precise seat of diseased action, concerning which, we are indeed often liable to be deceived. With parts of associated functions, there will be many sympathies spreading from contiguity. Mr. Abernethy observes, "It is probable that no material disorder can ordinarily take



place in one of the digestive organs, without disturbing the unctions of the others. When digestion is imperfectly performed, the functions of the intestinal canal will soon participate in the disorders of the stomach. Under these circumstances, the secretion of bile will also become irregular. Should disease commence in the large intestines, as about the rectum, it disturbs the functions of the stomach and secretions of the liver, and becomes augmented in its turn by its sympathy with these parts. Should the liver be disordered in the first instance, the stomach and bowels may not immediately sympathise, although they will probably soon become affected\*.”

Sometimes the patient describes his feelings of uneasiness to be exactly in the line of the duodenum, passing through also to the back in the opposite direction. The sensation is that of aching dull pain, with occasional shooting, and of heat, which often amounts to burning. In other cases, the right or the left hypochondrium is the seat of heavy dull pain, which is increased on pressure†. This is very dependant in its degree on the state of the bowels, and is mixed also with pain in the back and shoulder blade. It frequently happens that the only part

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\* On the Constitutional Origin, &c. p. 44.

† In examining the abdominal regions by pressure, in suspected disease of the contained viscera, we should not from our *tactus eruditus* hastily draw conclusions of the soundness or morbid alteration of any of the organs. The mode in which the examination is made, is of importance. When the patient is in bed, the legs should be drawn up, so that the abdominal muscles may be relaxed. If not in bed, and a sofa be not at hand, the patient's most favourable posture for examination, is that of resting the hand on a table, and leaning with the body bent ; or, more conveniently, leaning forward at ease in a chair.



which is tender or painful on pressure, is just at the ensiform cartilage. In association with a morbid state of the alimentary functions, this tenderness, especially if it be found when the stomach is not distended by food, is certainly indicative of a wrong condition of the liver. An irritable state of the abdominal muscles is a common attendant on a disease of the liver of long standing, and it is found very remarkably in some constitutions. In these cases, the muscles contract suddenly, even on gentle examination; and the abdomen, in consequence, conveys the feeling of hardness and rigidity. There are examples, in which, with uneasiness and even occasional strong pain in the parts which I have described, strong pressure is usually borne without complaint. In these cases, we may infer, that the viscera are most affected in their internal structure, or at their posterior surface.

An inability to lie on one or the other side is a frequent diagnostic of a tender state of the liver, and of the particular part which is affected. It usually happens that the patient chooses his posture on the diseased side; for, in this way, the muscles of the opposite ribs alone are called into action, for the purpose of assisting respiration.

The sympathetic pains are sometimes more remote and anomalous, affecting the shoulder blades, shoulders, or even the arms, as if with rheumatism; for which complaint they are often mistaken.

The sympathetic pain which indicates an affection of the liver is most commonly felt in the right shoulder or shoulder blade. I have known it to prevail for even a year, and occasionally with great severity, as a single symptom previously to the disturbance of the general health.

In a case of this description, the patient latterly noticed a lateritious sediment in the urine, and a greenish

colour of the alvine discharges. A severe fit of the gout followed.

The pulsation in the epigastric region, which is sometimes felt in an alarming degree by dyspeptic persons\*, is seldom met with in persons who are subject to acute gout; and appertains rather to those, who, together with an unhealthy state of stomach and liver, have an obstructed and vitiated state of mesenteric glands; are badly nourished; and possess a morbid sensibility of nerve, in a high degree. It is occasionally found in those who have been weakened by frequent attacks of gout; have lost their flesh; and now have the disease only in its chronic form.

A lady, forty-eight years of age, who suffers from enlargement of the liver, and always more or less from a faulty action of this important organ, strongly possessing the nervous temperament, is affected with the pulsation in question, so as almost to imitate the beating produced by aneurism of some of the branches of the aorta. She experiences this troublesome symptom, most, when her stomach is disordered; more when in bed than up; and it is invariably aggravated when lying on the left side. Her pulse is always regular.

I must add to this description, that in many instances, and probably in most, the pulsation in the epigastric region is found in patients, in whom no visceral enlargement can be discovered. I have met with several cases of this description. In two of these, the pulse at the wrist was on some days intermittent, on others, very regular.

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\* Dr. Baillie has offered many valuable observations on this subject, in a paper, entitled, "Upon a strong Pulsation of the Aorta in the Epigastric Region." *Med. Trans. of the College*, vol. iv.



I have been quite convinced of the justness of Dr. Baillie's observation, that this very troublesome symptom is seldom to be considered really alarming. It seems to be, and as Dr. Baillie appears to view it, a sympathetic action of the artery dependant on a disordered state of the digestive organs, in an irritable constitution. I conceive it analogous in its nature to a palpitation of the heart, the latter symptom usually being more associated with general perturbation of the nervous system, and more under the influence of the state of mind, than the pulsation in the epigastric region. But I must add, that this symptom affecting the heart, is also very commonly dependant on some error in the structure or functions of the abdominal viscera.

One gentleman, on the accession of a severe paroxysm of gout, was first affected with a strong palpitation of the head, and afterwards in the back, in the situation of the right kidney. The symptom was most troublesome at night.

Another gentleman, under the united influence of gout, and of bilious obstruction, suffered from a palpitation of the heart, and the pulsation of the aorta in the epigastric region, alternately.

Again, in a case of gout attended with a marked degree of bilious obstruction, and unhealthy state of the bowels, the symptoms complained of, were, heart-burn and violent eructations, palpitation of the heart and flutterings in the chest, together with now and then a curious feeling of explosion in the head, preceded by a sense of tightness of its integuments; and a starting of the limbs at night, which latter symptom I have before described as a frequent precursor of an attack. It also happens as a consequence of a long paroxysm having enfeebled the nervous system.



Another gouty patient, aged forty, when labouring under the chronic symptoms of the disease, experienced flatus in the stomach and bowels, torpid action of the bowels, occasional palpitation of the heart, and pulsation in the epigastric region, general languor, great depression of spirits, broken rest by night, and, in the day, a remarkable sense of weariness in the arms. Notwithstanding, however, the fact, that the pulsation in the epigastric region so frequently exists as a mere symptom of disordered function of the abdominal viscera, it is always incumbent on us to be very circumspect in forming our judgment, and to be careful lest we too hastily conclude that there is no morbid alteration of structure. There may be a tumour which is not of an aneurismal nature. I have known that an enlargement of the liver has been of such a kind as to receive the action of the aorta, and convey a pulsation so strongly as to make the case very suspicious, whether or not an aneurism did exist.

In the dyspepsia which attends an obstructed state of liver, and the various symptoms of indigestion of the lower bowels, the pulse at the wrist seldom shews any corresponding indication of such derangement; but I must add, however, that the circulation is by no means equally performed in such cases, under particular excitement of diet; and in proportion as the temperament is sanguineous, marks of morbid determination of blood to the head, attended with pain, throbbing, heat, weight, and vertigo, are readily produced. At night, together with much restlessness, the palms of the hands are affected with dryness and burning heat, while the feet are remarkably cold. When the powers of the stomach, in a person of nervous temperament, have been weakened from errors in living, or other unfavourable causes, the

circulation is universally languid, the extremities are easily chilled\*, and the general appearance is unhealthy and delicate.

The threatenings of apoplexy which afflict some gouty persons, and others, I can only advert to in this place, as connected occasionally with permanent obstruction and congestion of the liver. The aortal circulation not being carried on with due freedom in the abdomen, an unhealthy distribution of blood to the brain becomes the consequence. Dulness of the faculties, occasional head-ache and vertigo, flushings, and the feelings of morbid heat about the head and neck, a sensation of the head as if covered by a tight hat, and of the neck as if too much girt by the neckcloth, are the most ordinary symptoms.

Sometimes the symptoms are more remote, and affect one or both arms. The patient complains of a sense of bigness in the limb, with numbness, and upon holding it up, it seems heavy, and soon aches in a distressing degree.

In the case of a lady, fifty-four years of age, of the nervous temperament, for a long time subject to obstruction of the liver, and occasionally of the common duct, having a dark and bilious complexion, the bowels themselves in an unhealthy state, and the fæces remarkably loaded with mucus, I have found in two or three of her attacks a very slow pulse, the most extraordinary sensation of sinking at the pit of the stomach, as if there were an entire vacuity in the epigastric region, and such

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\* It happens with a few to suffer habitual coldness of feet to such a degree, that, even in summer, it is found necessary to wear very warm stockings.



general faintness, as to alarm the mind with the apprehension of immediate death ; a coldness of limbs ; but no pain in any part of the body. I shall hereafter discuss the treatment of the case, and only now mention that the complaint yielded to a perseverance in regimen, and the use of purgative, corrective, and tonic medicines, in methodical succession.

The head is liable to be affected by a very similar assemblage of symptoms, which may be either of a primary or secondary nature. These are, head ache, flushings, a sense of tightness of the scalp, giddiness, a throbbing which may affect any part of the head, but which is usually felt in the ears, and especially at night on the pillow. Great nervousness prevails, instability of the judgment, irritability of the temper, a fear to engage in ordinary exertions of mind, and a nervous hurry in the performance of any occupation. Our best judgment is sometimes called upon to determine, whether in this description of case the symptoms originate in the head, or proceed from the stomach, or other abdominal viscera. Our diagnosis will be formed by an analytical examination of various circumstances. If the head be primarily affected, the evidence of increased action will be very apparent, and the pulse itself will partake in the excitement. Tinnitus aurium and ocular spectra will be amongst the symptoms. The horizontal posture almost with certainty aggravates the symptoms, and the night is much disturbed with distressing dreams. A disordered stomach existing as the cause, carries with it much of instructive evidence ; the patient having a furred state of tongue, nausea or sickness, a deficient appetite, and loss of relish of the food. Most commonly the form of complaint just now described is of a mixed nature, proceeding in the first instance from an obstructed circulation, and obstructed secreting action



in the vessels of the liver, but from neglect has established itself strongly as a disordered action in the vessels of the brain itself. When speaking of the treatment of the disordered state of the digestive organs, I shall offer some further observations on the subject. It must be reckoned amongst the greatest improvements of modern medicine that the attention of the practitioner is duly awakened to the remarkable sympathy which the liver exerts in its functions with all the other viscera, not excepting those of the chest. In those cases of apparently true pthisis pulmonalis in which we have the satisfaction of witnessing a recovery, we shall usually find that the liver has been the fundamental seat of disease. A large quantity of blood is destined to circulate through the liver to be returned to the heart, and a very large portion also to be converted into bile. If therefore the regular formation of bile is interrupted, congestion of blood is a consequence, and the proper balance of circulation in other organs is disturbed. That organ which is the least healthy becomes most affected, as the brain, the heart, or the lungs, and we cannot wonder at the consequent derangement of the nervous system.

The remarkable degree in which dyspeptic persons are sensible to the influence of variable atmosphere, is familiarly known; and with gouty persons in particular, any considerable check which is given to the ordinary action of the skin, is with certainty succeeded by some uneasy internal feelings, together with sympathetic pains in those limbs which have been affected with gout. A harsh and dry state of skin is a common attendant on bilious dyspepsia; and a distressing itching, particularly affecting the back and arms, is very much complained of by those who are liable to gout. It not unusually occurs as one of the premonitory symptoms. An erythematous

rash ; and urticaria, or nettle rash, also occur ; and, in one remarkable instance, I saw the latter irritation exist in a violent degree, during two days before the paroxysm ; to which, and the treatment adopted, it immediately yielded. Other forms of cutaneous complaint also occur to the gouty patient, in common with all those who have an unhealthy condition of the digestive organs.

Itching of the skin, with or without eruption, is a very common consequence of an indiscretion being committed in the taking of certain acids, as pickles and unripe fruit ; or, if this do not happen, the stomach and bowels are the more irritated, and diarrhœa follows.

Having now taken a cursory view of several points relating to the derangements of the stomach, the liver, the intestinal canal, and the skin ; and noticed the sympathetic states of the circulation and of the nervous system ; it remains that I should deliver some account of the function of the kidneys, as constituting a very important link in the pathology of the digestive organs.

With respect to the gout, an attentive observation of the changes and condition of the urine is an abundant source of information. It is very commonly found, upon inquiry, that the patient has noticed a very deficient secretion of urine a short time before the occurrence of the paroxysm, and consequently it has been of a deeper colour than is natural. It also now and then certainly occurs, that for a day or two before the fit, the urine is passed copiously, and of a pale colour ; but this seldom happens except in persons of the nervous temperament, and whose constitutions have been much weakened by gout.

The quantity of urine which is secreted in the paroxysm is usually scanty ; and even when it is in natural proportion, is much concentrated. A portion of that which is



passed the first in the morning, should be the particular example for medical observation and examination. The colour of the morbid urine is various, and is affected by different causes; but whether more or less deep, it is found under these circumstances much increased in specific gravity, beyond the standard of health. This, from my experiments, which have been very numerous, I should state as ranging from 1·010 to 1·015\*. In the morbid urine to which I have referred, I have found the density sometimes increased to 1·035, and even to 1·040; and very usually to 1·025, and 1·030. It possesses the natural acid character, invariably, when in the recent state; but

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\* With a view to form some opinion of the degree in which the specific gravity of the urine, in health, might be influenced by modes of diet, I examined the morning urine of two healthy persons daily, for ten days; during which period, their habits as to fulness of living and moderation, and exercise and rest, varied exceedingly; and my results were, that under the greatest extremes of their regimen, the specific gravity of their urine was remarkably uniform; differing certainly, but not as might probably be expected. In several trials, I found that the urine of health possessed its highest specific gravity about two hours after dinner. It does sometimes happen that the early evening urine deposits the brick-dust or pink sediment, when that which is passed the first in the morning is almost or wholly free from it. In such examples, the evening urine has a higher specific gravity than any that is secreted in the twenty-four hours. Yet, notwithstanding, the general rule which I have just now mentioned, of selecting the first morning's urine for particular examination, will be most satisfactory. In the peculiar cases to which I have alluded, I have considered that the assimilation of the food has taken place very quickly. The patients have been of the indulgent class in their diet, and rather of irritable constitution.



such highly animalised urine soon becomes putrid and alkaline. Very dense urine proves an unnatural stimulus to the bladder and urethra, exciting much irritation; and sometimes in a degree to cause the apprehension, that a calculus obstructs the passage, or that a stricture exists.

A deposition of pink or brick-dust sediment on the cooling of the urine, is of such ordinary occurrence when any active symptoms of gout are present, that its connexion becomes forcibly impressed on the mind of the patient, and he gives it the name of gouty urine. A copious precipitation of mucus is invariably an attendant on either of the sediments in question, partly intermixing with it, and in part forming a distinct stratum upon it\*. This mucus also appears in the form of a pellicle on the surface of the urine, and stains the sides of the vessel with a milk-like fur. In some of its modifications, it has very much the appearance of floating oil. However much the urine may be loaded with these coloured and mucous sediments, it is transparent when first passed from the bladder, and does not, according to my experiments become turbid until it has cooled down to 63 or 62 degrees of Fahrenheit. By the application of heat it becomes completely re-dissolved, when the temperature is raised to 98. The whole sediment in question, uric, mucous, &c. adds but little to the specific gravity of the urine. I selected an example in which the pink sediment was unusually abundant, and found, that before filtration, its specific gravity at 60° was 1.0342; after, 1.0332. In the case to which the experiment refers, no

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\* The mucous stratum appears above or beneath the coloured one, according to the quantity and density of the two depositions.

tendency to gout belonged to the constitution; and in this part of my subject I shall only thus briefly advert to it, as one among numerous proofs which I could produce, that the appearance of these sediments is entirely dependant on a faulty state of the digestive organs; and upon unhealthy assimilation. It sometimes happens that the sediment changes from a red colour to white; and a considerable portion of mucus also accompanies this kind of deposition. When this happens in a slight degree, the urine is transparent on being first passed, and precipitates its sediment only on cooling. Whether gout be present, or whether a patient, free from the tendency to that disease, be affected with the disposition to secrete urine of this character, we may consider not only that the digestive functions are irregular, but that the different secreting organs are much influenced by a nervous state of the constitution.

When the sediment assumes a crystallized appearance, the state of complaint comes under the well-known denomination of *gravel*. I may observe, that the information communicated by patients on this point, is given with much incorrectness; some declaring that they are affected with gravel, if any deposition of the pink or brick-dust sediment appears; while others do not connect such an opinion with its appearance, although abundant, unless they suffer painful irritation in passing the urine; but when the crystals are seen, the representation that the gravel is affecting the kidneys or bladder, is invariably stated. Of these urinous precipitates, I have now to offer a few observations.

Any elaborate view of this important subject would be incompatible with the limits of this volume; but as the crystallized sediments of the urine now to be considered, fall equally with the preceding, under the head of



a morbid state of the digestive organs, a brief description of their external character may not be altogether uninteresting.

The establishment of a correct pathology respecting them, is of all possible importance ; as, in addition to the painful symptoms of irritation which they occasionally produce in the kidney and bladder, they not unfrequently augment, from neglect or ill treatment, so as to lead to that most painful of all diseases, *the stone*. These depositions may indeed be said to constitute the stone *in miniature*.

It happens, without any exception, that gouty persons are, at some period or other, either affected with gravel, or, with the deposition of the pink or brick-dust sediment. I have met with many instances in which the patient has related that he was painfully affected with gravel, before he became gouty, to the degree indeed of apprehending the sufferings of the stone ; but since, has only noticed the thick and coloured sediment. Some experience the gravel in the interval of the paroxysm, but very few are so affected when gout is present ; and an explanation of this phenomenon, I shall hereafter endeavour to suggest.

The appearance of that species of gravel, which, from its physical resemblance to small gravel or sand, has given rise to this familiar term, varies in several particulars. It is either angular and shining, and of an orange yellow colour ; or very minute, orbicular, shining, and of a bright red ; or of irregular form, dull, and of a yellow or reddish colour. With the two first varieties, the urine does not contain much suspended mucus ; but with the last, more in quantity. This last, indeed, is the intermediate kind between the angular bright crystal, and the



pink or lateritious sediment. The urine which possesses either of these deposits, invariably reddens litmus.

The next species of gravel is not only of a white and shining appearance, but is altogether free from coloured deposit. These crystals vary like the former in size; are sometimes angular, and in fragments of no inconsiderable size; but much more usually, they are in the state of very fine lamallated scales, and shine with silvery lustre. When they are very minute, and in small quantity, they do not appear visible until the urine has been some time at rest, when they become aggregated. When these minute shining crystals alone appear, the urine is transparent, and occasionally, as I shall describe at a future page, it is alkaline, and communicates a brownish red to turmeric paper. It usually happens that a mucous pellicle appears on the surface, entangling many of the minute crystals, which so refract the light, as to afford prismatic colours. The urine, in this case, is transparent, when passed from the bladder. When a very copious white sediment appears, partly crystallized, and partly in the state of rough powder, involved with much mucus, the urine itself is turbid, when first passed; but, according to my observation, it reddens litmus. The mucus in this sediment, as in the coloured uric, subsides both intermixed and in a distinct stratum; and sometimes appears to the eye, firm and gelatinous. On the surface of the urine, the floating mucus a little resembles oil. It now and then occurs that the two species are mixed; each partly crystallized, and in part in the state of powder; and a further variety is sometimes presented in the appearance of the crystals, from their being blended with dark-coloured animal matter, which is either greenish or blackish, in addition to the mucus, which in this case is

very abundant. In short, so far as my experience has gone, the sediments in question present as much diversity, as the formed calculi of the bladder, and require the same pathological reasoning, and medical treatment. These points, together with some discussion on the chemical composition of the respective deposits, are to be considered in a subsequent division of the subject.

I return now from this long digression, and resume my more immediate investigation.

### OF THE EXCITING CAUSES.

*Excessive Intemperance.*—THE sudden repletion, and inflammatory action of the general circulation, which follow extreme indulgence at the table, sometimes introduce a fit, in the course of a few hours, where the predisposition strongly exists. It rarely fails to occur, if the excess be much repeated; and now and then a debauch of the stomach appears to be the sole occasion of introducing the first fit.

One patient, neither descended from gouty parents, nor having reason to expect such a disease, after three or four days of successive conviviality, in which he drank *champaign* very freely, was seized severely with the gout.

In another instance also of acquired gout, the patient, by his external characters, not appearing predisposed to the disease, suffered a first attack, which had a very evident connexion with the frequent and free use of *champaign*.

One, of a temperament bordering on the pure sanguineous, with a circular chest and large veins, not born of gouty parents, after committing the extraordinary ex-



cess of drinking four bottles of port-wine at a sitting, was seized on the same night, and for the first time, with the gout.

In those who have long been gouty, any great excess in wine is a pretty certain fore-runner of a fit. A gentleman, for a few years subject to the disease, in whom the predisposition was hereditary, relates to me that on one occasion, after strong horse exercise, and supposing himself, from his comfortable feelings, quite secure, he drank a bottle of claret, in addition to some general indulgence at the table; and on the following morning, the gout took severe possession of both ankles. Although wines of any kind which are of bad quality, gives rise to certain injury in the gouty patient, yet it is a familiar fact, that the excitement of a paroxysm will much more probably happen from a wine abounding in acid, as *champaign*. The stomach being over-excited by the stimulus of the liquor, derived from its alcohol, is weakened, and cannot resist the acetous fermentation, which its acid nature excites; and hence a double source of irritation is produced.

The heating and exciting qualities of champaign, with regard to gout, are much more remarkable than are found from any other liquor. Being highly carbonated, it appears to stimulate unfavourably. If it has power to excite a first fit, we need not wonder that it is a fruitful occasional cause in producing the returns of the disease.

I have met with several instances in which the patient, thinking, from his feelings of general health, that he might indulge a little with impunity, has taken a few glasses of champaign; but, before twenty-four hours have elapsed, the gout has followed.

A gentleman, much disposed to gout, in the summer season, persuaded at the time of his security, drank six



or seven glasses of champaign, at a convivial dinner; and in twelve hours he paid the penalty of his indiscretion, in the arrival of a decided fit: which, however, was not of long continuance. He had never before been attacked in summer. I have even met with instances, in which the patient, not expecting any inconvenience to follow, has been sensible of gouty pains in the feet, from the drinking of champaign, before quitting the table. Some are so susceptible, that they feel this warning in a degree, even from a single glass. One gentleman assures me, that by the slight use of this liquor, or even of perry, he could, at any time, bring on more or less of gout in his feet.

If the error of drinking champaign be committed on one occasion only, and not in great excess, I have usually seen that it has given rise only to a fit of short duration. The effect however must depend on the state of the digestive organs, and the accidental degree of the gouty diathesis at the time.

I have now and then, yet very rarely, met with instances, in which the gouty patient has not considered himself to be injured by occasional indulgence in champaign, even to the extent of two or three glasses. Such exceptions should not, however, give any encouragement to the use of this luxury, by gouty persons.

The more habitual use of liquors of this class, and in proportion as it can be carried on long without exciting the fit, produces effects which are more lasting and severe. I saw lately a gentleman, who states, that, in his last visit to Paris, he indulged every day for some time in the light wines, and without seeming disagreement; but on his return home, he was attacked with gout, which, with its immediate consequences, lasted *forty weeks*.

It is a very common circumstance for those gouty

persons who visit France, to lay the foundation of an attack, by drinking freely the light wines of that country. Very probably they escape the attack during their stay, as the climate is for the most part more favourable than that of England; and also the body is generally kept in free exercise, and the mind amused.

When a fulness of the general habit prevails, the patient feels heated, as he expressively describes it; and when the gouty diathesis is present, we see the active influence of any stimulating liquor as an exciting cause of this disease, very strongly exemplified.

Briefly to illustrate this statement, I shall mention the following instances :

A gentleman, deriving the gout only remotely from his family, on two occasions took a pint of strong ale, and a little port wine after dinner. Each time, in a few hours after, he felt tinglings, pricking and shooting, in the great toe, and two of the other toes.

One gentleman expresses his certainty of having gout, if he takes both malt liquor and wine, although only in moderation.

Another, that if he drinks port wine for a week, although but sparingly, he finds the great toe hot, throbbing, stiff, and very painful.

A gentleman, who has had the slightest visitation only of gout, finds that merely two glasses of port wine, if it be of a strong quality, immediately produce pricking pains in the toe.

The gouty in inferior life, who cannot afford to excite a fit by wine, produce the effect with strong malt liquors and spirits: for in this way, also, indirect debility of the stomach is produced, acid matter is abundantly generated, and the inflammatory diathesis of the system takes place.



In this metropolis, examples have often come before me, of persons, whose indulgence consisting in the very free use of porter as a daily habit, and in the drinking of gin also, not to the extent of great intemperance, has produced the gout, entirely as an acquired disease, without any hereditary influence.

A man, not apparently predisposed to gout, kept a public house and drank usually two gallons of ale every day, some brandy and water, and a little wine. He scarcely took any exercise, and acquired the gout severely.

An eminent physician informs me, that he met with an extraordinary prevalence of gout in a country town, in which it was the custom, at the best tables, to drink freely a very potent ale, and scarcely any wine.

I may add to this general account, that in most of the instances, in which the sudden seizure of gout takes place in the day time, the circulation has been actively excited by stimulating liquor, and the attendant provocatives of the table. In three distinct cases, I learnt that the patient sat down to a convivial dinner, with scarcely the sensation of gout, but on rising to depart, the feet were completely disabled by the inflammation and swelling, which had made such rapid progress.

*Acidity*, when much accumulated in the primæ viæ, will always powerfully concur with other causes to excite a fit, and will sometimes prove alone sufficient. During the paroxysm, if occurring in a considerable degree, it is always a cause which produces much aggravation of the symptoms. When rejected from the stomach, it is very acrid to the throat; and this may be considered as a proof of its irritating power in the stomach. As I have already observed, it is often of a grass-green colour,



sometimes yellowish green, and now and then, but more rarely, colourless\*. In proportion to its acrimony, mucus is mixed with it more or less abundantly. In the first volume of the Medical Observations and Inquiries (p. 41), an interesting case is related, in which this kind of green acid vomiting proved critical to the paroxysm of the gout. I have met with several instances, in which the discharge of acrid fluid from the stomach has produced immediate and very sensible relief; but I do not remember any example of such a complete removal of the symptoms following, as described in this case.

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\* This fluid appears to be composed of the peculiar acid matter generated in a morbid condition of the stomach, together with bile and mucus. I believe that the green colour often arises from a vitiated state of the bile; but may also in part be referred to the change produced in it by the acid matter. What the nature of this acid is, seems questionable. An artificial admixture of acetic acid and bile in any proportion, does not produce the green colour; but it is readily effected with diluted muriatic acid and bile. I added recent bile to some colourless acid fluid, recently discharged from the stomach, in the proportion of one part to sixty, and a light green colour immediately appeared, which, on standing, became grass green. If the bile be added in any considerable proportion, the yellow colour predominates; and in the same proportion that this occurs in the stomach, the patient complains of a bitter taste. The green fluid in question rejected from the stomach when in a weak and irritable state, is very weakly acid, as is proved by the slight degree of neutralising power which it exerts when added to an alkali.

In the specimen now mentioned, two drams were rendered neutral by three drops of the liquor potassæ of the Pharmacopœia. The patient's sensation of intense acidity, in this case, therefore, must be connected with a morbid sensibility of the surface of the œsophagus, continuous from that of the stomach.

*Obstruction and Excess of Bile.*—A jaundiced skin, with general fever, pain in either hypochondrium, costive bowels, with bilious vomiting; or, acrid bilious diarrhœa, and scanty, deep-coloured urine, sometimes occur as the short precursors of a paroxysm.

A gentleman, whose gout was not due to hereditary influence, had been very industrious in gardening on a hot day in autumn. In the evening he was seized with bilious vomiting and diarrhœa; and on the following day the gout appeared in one foot.

*Cold*, with or without wet applied to the body generally, or to the lower extremities only, especially when in concurrence with fatigue, proves, in an equal degree, exciting to the gout in an individual who is predisposed to the disease, as to the phlegmasiæ in general; and it is by far the most frequent of the exciting causes. The act of walking in thin shoes on damp ground is always hazardous. One gouty patient informs me, that on several occasions, when in the occupation of his business (surveying buildings), he has been standing for some time on cold damp pavement, his bowels have been quickly attacked with pain, with subsequent constipation; and the gout has followed in two or three days. This same patient was formerly in the habit of getting wet in the lower limbs from salt water, in an employment at sea, and continuing so for several hours, with impunity. I should add, however, that at that time he had never suffered the gout. I know several gouty patients, whose sensibility to the immediate influence of the east wind, or to the act of standing on damp pavement, or very damp ground, is almost incredible! We see that cold, whether applied locally or generally, acts most powerfully when conjoined with wet; but certainly the



east wind\*, by itself, is a severe and active agent. On visiting a patient just recovering from a paroxysm, upon an afternoon when the wind had suddenly changed from the east to the south-west, I was amused by the very emphatic description which he gave of the happy alteration in his feelings. It appears to me, that, of all the forms in which cold acts upon the body, a wet fog, with a penetrating east or north-east wind, appears to be most certainly injurious. It may be useful to mention the following facts, as affording cautionary hints.

A gentleman, subject to a severe attack once every year, having had his accustomed fit, some time after rode in a damp and cold state of the atmosphere, returned home rather chilly, and unguardedly changed his clothes without putting on his flannel gown, as usual, while dressing. This continued operation of cold excited gout in both feet on the following day. On a subsequent occasion he suffered the same consequence from riding on the outside of a coach, insufficiently protected by clothing, when the wind was in the east.

Another traced an attack to the simple act of putting on stockings which were rather damp.

Another, who was just convalescent from a first and severe attack of gout, imprudently walked on the wet pavement in showery weather. On the following day, he suffered a severe relapse; but the symptoms entirely lost their former regular character, and assumed as much the appearance of rheumatism, as of gout. It would be almost endless to enumerate the cases in which a continued exposure to wet and cold has excited the paroxysm,

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\* Dr. Gregory, in his lectures, observes, that the genial south and west have alone been invoked with praise by the poet.



either as the immediate consequence, or as a sequel to some other of the phlegmasiæ.

In either case of the application of cold, whether in conjunction with wet or not, its first effects appear to be very general; but injury soon becomes manifested in the weakest part of the body. The capillary circulation is checked near the surface, the blood flows to the internal parts in preternatural quantity, and congestion in the weakest organs, or most morbid part of structure, is consequently produced. The secretions become disturbed and vitiated; and the nervous system partaking in the irritation, many sympathies, and various sensations of disease, are the fruitful consequences.

*External Injuries.*—Strains, concussions, contusions, or any mechanical violence offered immediately to the part which becomes affected with inflammation, or even to some other part of the body, very commonly prove exciting causes of a paroxysm. Even a first fit is sometimes excited in this manner, and the patient imagines that he labours under a common strain only.

One gentleman suffered his first attack, which was in the foot, after unusual exertions in dancing, being at the same time under the influence of the effects of a convivial entertainment. In another case, an accident, by which one leg was broken, gave rise to severe gout in the other leg, on the following day.

A female, whose gout was *acquired*, had her first fit excited, in the great toe, by a severe blow on the foot. I am acquainted with numerous other cases, in which the first attack was imputed to some local contusion or strain; and was treated at the beginning by the usual means employed for such accidents. Under the head of my present subject, I may add the following facts.

A gentleman, much subject to gout, when considering himself unusually well, underwent the slight operation of having the nail of the great toe cut on account of its improper growth. The toe was much pressed, and gouty inflammation was the immediate consequence.

In another case, the patient never before having suffered the gout, tore off a broken portion of the thumb nail, so as to make the part tender. Very soon, the thumb and part of the hand put on a swollen and shining appearance, and was exquisitely painful. A poultice was applied. Suddenly, on the third evening, the pain-quitted the thumb and seized the toe, next the ankle, then the knee, and lastly the great toe of the other foot. Throughout, he procured ease and sleep as the first light of the morning appeared; and hence facetiously observed, that the gout, in this respect, assumed all the behaviour of a *ghost*.

A gentleman had the misfortune to break his thigh by a fall from his horse. In a week after, he was attacked with gout in the great toe of the foot of the other limb. He described the pain of the gout to be infinitely more severe than that which he had suffered from his accident.

A dislocation of the shoulder was succeeded by an attack of gout and rheumatism in the part, alternately.

Any surgical operation performed upon a gouty person most commonly leads to a paroxysm in the course of a few days. I have seen this happen from various kinds of operations. Sometimes it proves a gout of irritation, and yields quickly; but if at the time the system be much predisposed to gout, a very troublesome fit ensues. Hence it follows, as an important practical rule, that the patient should be properly prepared for an operation by medical treatment.



A gentleman who has lost a leg by amputation, occasionally suffers from gout in the stump.

I have seen one case, and been made acquainted with the particulars of another, in which a paroxysm followed in a few days after the operation being performed for cataract. The patient was previously well, and, as may be supposed, not having the least expectation of gout; which was evidently called forth by the influence of the constitutional disturbance from the operation. It is with much pleasure, however, I add, that no untoward symptoms occurred to the eye, and those of the gout were quite tractable.

A very gouty patient had his great toe trodden upon by a heavy person, and a paroxysm began in the part on the following day.

It seems necessary however to the effect of local injury, that the *constitutional* disposition to an attack should exist. In a gentleman for many years severely subject to gout, the knee received a severe contusion in a fall, and the muscles were violently strained, but only common inflammation followed. Another gentleman who had suffered repeated fits of gout during eight years, strained his foot violently; but the accident did not give rise to any gouty inflammation.

The following striking illustration of this principle of pathology lately came under my observation. A gentleman, gouty for many years, received a severe blow on the knee, which produced the tenderness usual from such an injury for two days. It then recovered completely. A week after, having two days previously indulged in champaign, he was seized with gout in one foot; and before forty-eight hours had elapsed, the knee, so recently bruised, became affected. On all former occasions the disease had only occupied the feet



When the gouty diathesis is present, any considerable degree of local injury seems with certainty to be followed by a fit. A gentleman who had been subject to gout fourteen years, at a time when he considered himself in more than usual health (yet living very freely), strained his ankle, in slipping from a stool. On the same day, that foot was attacked with gout, which continued a fortnight. The other foot next became affected, and was under the disease three weeks. This was the most severe fit which he had ever experienced. Even a fall, as from a horse, giving only a general shock to the frame, sometimes proves an exciting cause. I have known three instances of this, in which the gout took place on the following day, although no injury was received on the parts which became affected.

The pressure of too tight a shoe, and more especially if the patient walk much under such irritation, will occasionally induce gouty inflammation. That degree of straining of the disorganised and weakened ligaments and tendons, which appertains to an excess in walking, always proves injurious, and sometimes excites a fit.

A corpulent and elderly lady, seldom using exercise, from an urgent necessity walked a distance of four miles; at the same time accidentally exposed to rain. She considered herself in unusual good health. On the following day, however, the gout seized both feet; and, afterwards attacking the knees, continued four months. In this case, there was certainly the two-fold cause of fatigue and cold; but she described, that she felt such immediate sensible injury from the over-exertion, that she judged the consequences to be principally ascribable to it.

Some patients assure me, that they are convinced, from the occasional injury which they have experienced, that

they could at any time produce an attack, by over-walking in any extraordinary degree.

I may add, that any of the modes of local injury, which I have enumerated, will powerfully operate to produce a relapse, at a time when the convalescence has begun apparently in the most favourable manner.

A gentleman, much subject to gout, informs me, that, when quite convalescent from the paroxysm, he received a kick upon that leg of which the foot had been affected; and a consequent return of gout immediately followed.

It happens very commonly, that premature exertions in walking, just as the paroxysm is taking its leave, produce a relapse.

I might relate many cases in illustration of this position; but I shall limit my narration. A gentleman, when a youth, accidentally received some small shots from a gun in one knee. They were removed, but the knee was rendered permanently weak in a slight degree; and to this part, the gout in after-life first attached itself, and always afterwards with more severity than in any other situation.

Another gentleman, many years before he had the gout, injured his ankle by a fall from a coach. This ankle was first visited by the disease, and was in all the fits much more affected by pain than any other part.

I have indeed often witnessed that a part, which has been the seat of former accident, has caused the severest suffering in the fit.

*Fatigue and Anxiety.*—That fatigue which is the joint offspring of mental anxiety and bodily exertion, is a very common cause of exciting a paroxysm. I have lately attended two female patients, who had suffered the gout in its severest form one of them for the first



time; brought on from the nervous exhaustion which they had sustained, each in nursing a relation dangerously ill, several nights in succession. Late hours, with intense application to business, and in proportion as the feelings are anxiously concerned, lead with certainty to an attack, when the predisposition is only moderately strong. I have seen many proofs of this fact. A fatiguing exercise of the attention is sometimes injurious, even when the mind is agreeably engaged. Thus, one gentleman, much subject to gout, assures me that he has more than once excited a fit by a game at chess.

*The Passions of the Mind.*—Although in most of the instances related by authors, the strong passions have rather had the credit of *curing*, than the reproach of *causing* the gout; yet we may believe, that, on some occasions, they will serve to excite a paroxysm.\* One patient informs me, that some of his worst fits have immediately succeeded a violent irritation of temper; and in other examples, some mental shock has been quoted as the cause of attack. In such cases we may consider, that the system is at the time in a state of great readiness to take on the disease; the nerves are morbidly susceptible in a high degree; and the temper also is more irritable. In the fit itself, an irritability of disposition is almost proverbial with every author.

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\* The active influence produced both on the appetite and digestion, by violent emotions of the mind, is constantly exemplified. The secreting action of the liver is also affected very suddenly by the same cause. Horace, in his description of jealousy, has, with very little of poetical fiction, noticed this circumstance:

“Fervens difficili bile tumet jecur.”—Ode xiii.



Sydenham observes, indeed, "that every paroxysm may be as justly denominated a fit of anger, as a fit of the gout."

Van Swieten relates, *I had long an intimate friendship with a person of very great learning, and other-ways of a sweet, peaceable, and mild disposition, who, taught by his experience, could at last foretel when he was to have a fit, by his being peevish a little before, and out of humour with every trifle.* I must, however, add to this account, which will not appear very flattering to the gouty patient, that I have met with many happy exceptions, and have seen a serenity of mind preserved throughout all the sufferings of a severe paroxysm.

### THE PROXIMATE CAUSE.

THIS subject of investigation has, with regard to diseases in general, proved an *ignis fatuus* to medical theorists; and the remark may be strongly applied to the case of gout. Aretæus considered, that the proximate cause was known only to the gods. By less pious inquirers, ingenious speculation has been exercised, and profusely substituted in place of solid principles; and various opinions built upon hypothesis (that is, upon conjecture without proof, or even reasonable evidence), have been at different times advanced, with all the pride and confidence of truth.

The uric-concretions (or *chalk-stones*, as they are improperly called) which belong to the gout in a few individuals, appear to have been the chief source of the doctrine of a morbid matter, from Hippocrates to the present time.

A *materies morbi* has been differently conceived

by every new author; and amongst the various denominations assigned to the supposed substance, I may mention the following:—*phlegm; acidity in the semen; bilious humour; mucilage; tartareous, or urinous salt; an earth; a volatile alkali; an æther; a superfluous part of the chyle;* and the list might be greatly extended.

Some writers\* have contended that an excess of uric acid, or its elements, in the system, is the *proximate* cause of gout. This inference seems to have been deduced from the occasional instances of the external uric formations, already noticed; from the presence either of pink or lateritious sediment; or the reddish crystals (commonly called *gravel*), so generally found to exist in the urine in connexion with the gouty paroxysm; and further, from the remark of Berthollet, “That paper coloured blue by litmus, becomes red on being exposed to the perspiration of a part affected with the inflammation of gout†.” Dr. Wollaston mentions, that “In gouty persons there is always a redundance of uric acid‡.” In reference to a similar theory, and upon chemical principles of practice, Sir Everard Home and Mr. Brande advised the employment of magnesia in gravel, and also in gout§.

In respect to the uric concretions, as a consequence of gout, it must be observed, that their formation is com-

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\* Forbes, in a “Treatise on Gravel and Gout, London, 1787;” and Parkinson, “On the Nature and Cure of Gout London, 1805.”

† Parkinson, p. 22.

‡ Philosophical Transactions, 1810, Part II.

§ Ibid. Part I.



paratively so rare an occurrence, and so much confined to certain peculiar habits, that the phenomenon cannot be assumed as a basis for the construction of a general theory of the disease; and much less, can this singular morbid process be considered as its *proximate cause*. In five hundred cases of gout, I have not discovered any trace of this kind of concretion in more than forty-five persons.

While, on the one hand, this process is sometimes described as a common effect of highly inflammatory gout, being thus considered as a general circumstance; it is on the other asserted, that it occurs, occasionally, where no previous evidence of gout in the constitution has yet existed. The error of the first conclusion I have already pointed out; and I have sought, without success, for an example, to prove the correctness of the last opinion. In all the cases which have come within my knowledge, gout has more or less preceded.

The sediments in the urine, to which I have adverted, are not the peculiar attendants of gout; but occur under various kinds of disease, both constitutional and local, in connexion with a morbid state of the digestive organs.

Upon the question also of an excess of uric acid secreted by the kidneys, as indicated by the deposition of the crystals, or the pink or lateritious sediment, and its supposed relation to the proximate cause of gout, I may state, of the crystals more particularly, that they are not to be considered as a proof of an excess of uric acid; but rather as a separation of this principle from the urine, and a new combination with some other of its elements. If nitric or muriatic acid be added to urine of moderate specific gravity which has deposited these crystals,



scarcely any further uric precipitate is produced; and having in different experiments carefully estimated the quantity so obtained, with that procured from healthy urine of the same specific gravity, by the same methods, I have found the position in question to be fully manifested; equal portions of such healthy urine furnishing a quantity of uric precipitate, equal to the whole of that spontaneously and artificially precipitated from the morbid urine, with which it was compared.

Such urine as deposits the pink or lateritious sediment in an abundant quantity, is, according to my experience, always of high specific gravity, and from such specimens I have invariably procured a much larger *total* quantity of uric acid, than from any urine of moderate specific gravity; but I must add, that if this sediment be in small quantity, and the specific gravity of the urine be not considerable, almost the whole of the uric acid which such urine possesses, is found by experiment to have been precipitated in the sediment; further confirming the argument, that the relative quantity of the uric acid in the urine has a great correspondence with its specific gravity, and cannot be so much inferred from appearances, as we have been hitherto taught to believe.

As such sediment, and in abundant quantity, is a very common occurrence in the urine secreted during a paroxysm of gout, a basis appears to be presented for the assumption of the theory under discussion, in relation to the proximate cause; but it must first be taken into consideration, that such sediments are neither necessarily nor regularly attendant on a paroxysm of gout, and that they are found, as I have before stated, under other circumstances of disease, in connexion with unhealthy chylipoetic functions. In proportion, therefore, as gout is

associated with such disordered functions, and not further, are these urinary evidences connected with that disease.

An important fact is also to be added, of which I have obtained very abundant proof by experiment, that not only the uric acid is in excess, in urine of high specific gravity, in the examples of the gouty specimens to which I have now alluded (and also in urine of similar density in other diseases); but, other principles composing this secretion, as the phosphoric, sulphuric, and muriatic acids, and also urea, are secreted in preternatural quantity.

An opinion suggested by Berthollet with regard to the peculiar nature of gouty urine, is of such importance, that it has engaged my particular attention. The following is a translation of the original, as quoted by Barthez. *That from numerous observations, he was convinced, that the phosphoric acid (which is always in the urine combined in excess\* with calcareous earth) is naturally in much less quantity in the urine of persons subject to gout and rheumatism, than in healthy persons; but that at the approach of a paroxysm, and during its continuance, the urine contains as much of*

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\* Berzelius has pointed out the error of the supposed existence of free phosphoric acid in the urine, in the following words: "As, by the laws of chemical affinity, these acids will unite with any alkali that may be present, and saturate themselves with it in the order of the force of their respective affinities, it must follow, that where the quantity of alkali is insufficient to saturate all the acids present, the weakest acids must be those that will remain uncombined, and will give the urine its acid properties. These, therefore, must be the lactic and the uric."—Medical and Chirurgical Transactions, vol. iii. p. 257.

*phosphoric acid, as that of persons of strong constitution, and much more than belongs to the gouty in their ordinary state.\**

I have submitted the truth of these doctrines to the test of careful experiment; and the results of this investigation, I now offer in the annexed statement.

Richerand, in his *Elements of Physiology*, advances an opposite theory, and observes†. “On the approach of fits of the gout, the phosphoric ingredients of the urine diminish, and seem to be carried to the joints, to produce, in their vicinity, arthritic concretions.”

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\* *Traité des Maladies Gouteuses*, tome i. p. 50.

† Translation by De Lys, p. 141.



# FROM FOUR OUNCES OF URINE.

EXP.		Sp. gravity.	Precipitate by		Ph. acid.
			Nitr. of lead.	Ph. of lead.	
			Grains.	Grains.	Grains.
I.	J. W. under a paroxysm of gout; urine of orange colour, with minute uric crystals, and some mucous cloud.....	1.016	22	13.7	2.88
II.	Ditto in health, and two months after recovery; urine natural.....	1.0199	18.4	4.6	.96
III.	A. L. under a paroxysm of gout; urine of deep orange colour, with copious pink sediment and mucus.....	1.028	66.2	43.7	9.2
IV.	Ditto, in health, and two months after recovery; urine natural.....	1.0168	26.3	14.1	2.97
V.	J. C. under a paroxysm of gout; urine of amber colour, and with mucous cloud only, but precipitates albumen with nitric acid.....	1.014	28.8	4.8	1.02
VI.	Ditto, in health, and three months after recovery; urine natural.....	1.0137	16.2	4.3	.91
VII.	C. M. under a paroxysm of gout; urine of deep orange colour, with copious pink sediment and mucus.....	1.020	50.5	20.2	4.3
VIII.	Ditto, in health, ten weeks after recovery; urine natural.....	1.0107	23.4	7	1.47
IX.	E. P. under a paroxysm of gout; urine of deep orange colour, with very copious pink sediment, and mucus.....	1.029	71.5	30.4	6.41
X.	Ditto, in health, ten weeks after recovery, urine of orange colour, with uric crystals, and mucous cloud.....	1.0191	40	19.2	4.05

# FROM FOUR OUNCES OF URINE.

EXP.		Precipitate by			
		Sp. gravity.	Nitr. of lead. Grains.	Ph. of lead. Grains.	Ph. acid. Grains.
XI.	W. W. (see Case I.) one day before an attack of gout, feeling in health ; urine of amber colour, with some uric crystals and mucous cloud....	1.0094	13.8	3.8	.8
XII.	Ditto, second morning of the paroxysm ; urine of deep orange colour, with copious lateritious sediment and mucus.....	1.0201	55.2	25.4	5.36
XIII.	Ditto, seventh morning ; urine of amber colour, with mucus, but a trace only of the pink sediment.....	1.0099	30	15	3.17
XIV.	Ditto, eighth morning ; urine of deep orange colour, with dirty brick coloured sediment, and much mucus.....	1.0242	46	18.4	3.88
XV.	Ditto, ninth morning ; urine of amber colour, with the mucous cloud of health, but no other sediment.....	1.012	24	4.8	1.02
XVI.	Ditto, tenth morning ; urine as yesterday, with the addition of some minute uric crystals.....	1.0105	28	7	1.47
XVII.	Ditto, eleventh morning ; urine of light straw colour, with minute uric crystals, and more of mucus than yesterday.....	1.0106	32.8	16.4	3.47
	Ditto, twelfth morning ; urine natural.....	1.0085			
XVIII.	Ditto, in health, about two months after recovery ; urine natural.....	1.0172	26.8	13.3	2.8

# FROM FOUR OUNCES OF URINE.

EXP.		Precipitate by			
		Sp. gravity.	Nitr. of lead. Grains.	Ph. of lead. Grains.	Ph. acid Grains.
xix.	J. G. (see Case) hepatitis, with gouty diathesis; urine of deep orange colour, with copious pink sediment, and mucus.....	1.0207	57.6	19.5	4.1
xx.	Ditto, eleven months after the former period; digestive organs not in sound health; urine of orange colour; with abundant uric crystals, and mucous cloud.....	1.014	20.4	10	2.1
xxi.	J. W. aged 45, under a paroxysm of gout; urine of deep orange colour; with pink sediment and uric crystals, and much mucus.....	omitted	42.5	16.1	3.4
	Ditto; no opportunity of comparison.				
xxii.	J. M. aged 38, under a paroxysm of gout; urine of amber colour, with some pink sediment and mucus.....	omitted	35.6	10.6	2.24
	Ditto; no opportunity of comparison.				
xxiii.	T. A. aged 37, in health; of free habits; not subject to gout or rheumatism; urine natural.....	1.0113	25	13	2.75
xxiv.	L. S. aged 37, ditto; of free habits; ditto.....	1.0183	40.8	20.5	4.33
xxv.	A. J. aged 24, in health; of free habits; subject to violent acute rheumatism; urine natural.....	1.0173	17.4	5.6	1.18



# FROM FOUR OUNCES OF URINE.

	Sp. gravity.	Precipitate by		Ph. of lead.	Ph. acid.
		Nitr.	Grains.	Grains.	Grains.
EXP.					
xxvi.	E. J. aged 19, in health; not subject to gout or rheumatism, but plethoric, and liable to tonsillary inflammation; urine natural. ....	1.0217	49.2	20.4	4.31
xxvii.	H. T. aged 48, not subject to gout; suffering under chronic hepatitis and morbid alimentary secretions; urine of deep orange colour, with copious pink sediment and mucus. ....	1.0334	49.2	22.8	4.82
xxviii.	Ditto, in two or three months after, when in improved health from a course of medicine; urine of amber colour, and free from sediment. ....	1.018	37.2	13	2.75
xxix.	J. T. aged 34, a strong man, under severe continued fever; urine of deep orange colour, with much pink sediment and mucus. ....	1.025	32	18.5	3.9
xxx.	Ditto, in six months after, in perfect health, and of moderate habits, but very plethoric, and of sanguineous temperament; urine natural. ....		48	24	5.07
xxxi.	S. P. aged 39, a robust man, of free habits, plethoric and sanguineous; under acute hepatitis; urine of deep orange colour, with much pink sediment and mucus. ....	1.023	38.4	24	5.07

# FROM FOUR OUNCES OF URINE.

	Sp-gravity.	Precipitate by		Ph. of lead.	Ph. acid.
		Nitr. of lead.	Grains.		
			Grains.		Grains.
EXP.					
xxxii.	Ditto; feeling in general health, two months after; but certainly the functions of the liver not yet correct; living freely; urine of light orange colour, with some pink sediment and mucus.....	1.0245	40	28	5.92
xxxiii.	J. B. aged 13, robust, and not of unhealthy appearance; bowels constipated, with much spasmodic pain and nephritic irritation; urine of amber colour, depositing the phosphates, and also holding them abundantly in solution, although it vividly reddens litmus.....	1.018	36.6	17.7	3.75
xxxiv.	L. S. (a female) aged 23, robust: under acute rheumatism: urine of orange colour, with slight pink and mucous sediment..... omitted		29.2	5.1	1.07
	No subsequent opportunity of comparison.				
xxxv.	L. M. a boy, aged 4, diseased with tabes mesenterica; a large belly, with distension and hardness; narrow chest; cough; irregular fever and debility; urine of amber colour, with much lateritious sediment and mucus.....	1.0263	51.2	23.5	4.96

# FROM FOUR OUNCES OF URINE.

Sp.gravity.    Nitr. of lead.    Ph. of lead.    Ph. acid.  
Grains.                      Grains.                      Grains.

EXP.

xxxvi.    H. C. aged 42, robust, and engaged in laborious employment ; ill with continued fever; urine of orange colour, with pink sediment, and mucus..... 1.023    44.8 omitted omitted

xxxvii.    Ditto, in health; two months after recovery; urine natural..... 1.0154    24.6    ditto    ditto

xxxviii.    A. B. a female, aged 3 years; a well grown child, now very ill with cough and fever, and disordered bowels; the fæces blackish; the urine of deep orange colour with copious deposition of the phosphates, although reddening litmus in the usual manner: so much loaded with urea, that without concentration it immediately crystallized with nitric acid..... 1.0214    39.2    27.4    5.8

xxxix\*.    R. T. a female, aged 2 years and a half; of rather a healthy countenance, but suffered from mollities ossium, in a very great degree, both in the upper and lower extremities..... 1.0299    35.6    20    4.22

xl.    M. D. female, aged 5 years; robust and of a full habit, and in a state of inflammatory diathesis..... 1.024    43.2    28    5.92

\* It has been conceived that in mollities ossium, the kidneys secrete a preternatural quantity of phosphate of lime, depriving the bones of this principle. So far as one example may be quoted, I may refer to this Experiment, in contradiction of the hypothesis.



In these experiments, nitrate of lead was the precipitant employed; and the urine was diluted with distilled water. A portion of the urine, first and separately passed in the morning, was, in each case, chosen for examination. The precipitate was carefully dried and scraped from the filter. Of this, a certain quantity was boiled in distilled water, that the muriate of lead might be removed; and with it also the uric acid was separated. It was then burnt in a crucible for about half an hour, that the several animal matters should be destroyed as much as possible. It was next boiled in diluted nitric acid; and being allowed to rest, the clear liquor was decanted from the sulphate of lead and some insoluble animal matter. To this, ammonia was added in excess; the precipitate was collected on the filter, dried, and weighed. This was the phosphate of lead, from which the relative proportion of phosphoric acid was estimated, by means of Dr. Wollaston's logometric scale. Equal quantities being always employed, and all circumstances of experiment being alike, it may, I hope, be presumed, that this investigation, by comparative experiments, is entitled to confidence.

The method which was thus adopted may appear improperly complicated; but I was led to employ it, from the comprehensive opportunity which it afforded me, of judging with tolerable accuracy of the relative quantities of the different principles of the urine in every example. I derived these results from estimating how much the given quantity of precipitate under examination had lost by each process. By the agency of nitrate of lead as the precipitant, the several principles of the urine are almost wholly thrown down. Some of the muriatic solution, with a portion, also, of animal matter, in union with lead, remain in the filtered liquor. It will proba-

bly be suggested as an objection against my conclusions from these experiments, that the urine is a secretion of such variable density, in the same individual in the course of each twenty-four hours, that fallacious inferences, deduced from the particular portion examined, can scarcely be avoided.

In answer to this objection, it can with truth be stated, that if the first urine of the morning *separately procured*, be made the subject of examination, great accuracy of results will be obtained; and by observation and investigation, carefully conducted, I may assert, that a very faithful judgment may be formed, of the state of the important function which the kidneys are performing.

The general accordance of the specific gravity\* of the urine with the principles which were sought for in these experiments, is further satisfactory, as proving the utility of the information, which may be obtained from examination of this point alone, with a view to forming general conclusions, when it is desirable to obtain some judgment, with convenient promptness, of the condition of the secreting action of the kidneys.

With respect to the position of Berthollet, it is manifest that in the urine of persons under a paroxysm of gout, the proportion of the phosphoric acid is greater than in their healthy state; but the same truth is also apparent in experiment xxvii. in a person whose liver was diseased, and who never had gout. In Experiment xxxii. the same contrast to the former state is not presented, as the patient was under the stimulating excite-

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\* In all my experiments, I employed the temperature of 60° of Fahrenheit. I found the following variations of specific gravity in the same urine, at different temperatures: at 60° 1.027, 70° 1.0256, 80° 1.0251, 90° 1.024, 100° 1.0201.



ment of free living, and was not quite free from hepatic complaint. In Experiment xxx, the actions of the system were vigorous, under a full circulation, and a sanguineous temperament. In Experiment xxxvi. the case of continued fever, the precipitate by nitrate of lead is as much more in quantity than that obtained in the health of the patient, as in most of the examples of gout. It seems, therefore, that the phenomenon in question cannot be considered as a specific occurrence in gout alone; and we are consequently forbidden from saying, that an excess of phosphoric acid in the system is the *proximate* cause of gout; and the more especially is such an hypothesis opposed, when we take into consideration the general fact already stated, that in urine of high specific gravity in gout, the other principles of this secretion also are in excess. It is incumbent upon us to avoid partial opinions founded on partial deductions.

In regard to the statement of Berthollet, "that the phosphoric acid is naturally in much less quantity in the urine of persons subject to gout and rheumatism, than in healthy persons," it may be remarked, that so far as these experiments apply to the question, this inference must not be hastily drawn. Each of the gouty persons was pursuing more or less a regulated regimen, and may be supposed also to have retained some corrective influence over the digestive functions, and the general secreting actions, from the previous course of medicine; while in the healthy examples which were chosen, and particularly in Experiments xxiv and xxvi, the habits of living were indulgent, and the circulation was plethoric.

In Experiments iii and ix, the proportion of phosphoric acid was in great excess, over the examples to which I have last referred; and in the Exp. xi and xii, the comparison is particularly interesting, together with the



subsequent series. Exp. xi points out that the kidneys were deficient in their function of removing matter from the blood requiring to be excreted; and in two days after, a disease was set up in the constitution, for the relief of which Nature immediately employed her own powers; and the kidneys, in part of the salutary effort, became excited to increased secretory action. In how great a degree, a previous retention in the system of the elements of phosphoric acid, or the other principles to be discharged by the kidney, may be considered in the relation of cause and effect to the gout, it would be hypothetical to contend, if the question of *proximate cause* be considered; but the general fact of an excess of excretion of all the principles of the urine, in the paroxysm, is very apparent.

The theory of Berthollet, of an excess of phosphoric acid in immediate connexion with the paroxysm, as cause and effect, has not only been adopted by others; but has, I know, been carried to its utmost limits, in a comparison drawn between the phenomena of gouty inflammation, and of phosphoric combustion. The Experiments xxxv, xxxviii, xxxix, and xl, do not apply to the present question, as they are not comparative with respect to the individual children; but they serve to shew the large proportion of phosphoric acid which belongs to the urine of children. It is a curious fact, that the child, whose urine was chosen for Experiment xl, and which possessed such a large proportion of phosphoric acid, was attacked in the evening of that day, when she was considered to be in her usual state of robust health, with a violent inflammation and swelling of half the face. The hypothesis of Richerand is altogether founded upon false principles. According to my experience, and so far as I have ever learnt, the phosphoric acid does not enter into the composition of the arthritic concretions.

The proximate cause of a disease must not only be something which is invariably antecedent, but also that which is distinctly peculiar to such disease; and the whole of this position I am not able to demonstrate; although some general points are, I trust, satisfactorily proved.

The results which the preceding experimental investigation has afforded, appear to me interesting, both in a physiological and pathological point of view. They exemplify the activity of the kidney as a salutary organ of excretion, and as constituting a very material agent, which Nature often employs to relieve the overloaded system. In this view of the subject, at the same time that I consider the excretory function of the kidneys as really a part of the curative process which Nature is attempting to accomplish, I do not mean to contend, that the *specific cause* of the disease is in this way removed; for such a conclusion would be at variance with the results of my experiments. The investigation appears to me of additional importance with reference to the doctrines of the humoral pathology, which have probably been too violently discarded in modern medicine. Notwithstanding, however, that I advance this sentiment, I would not be understood to lean to the extravagant notions of the mathematical sect of physicians, Langrish, Bryan Robinson, &c. who offered very refined calculations of disease, deduced from the state of the blood. Also, in admitting or contending, that the different fluids of the body vary in their chemical composition, in health and disease, we should abstain from all particular conclusions, which are not founded on careful experiment; and we should studiously shun the wild hypotheses of the humoral pathologists in general.

In pursuit of my present immediate inquiry, I have



now to notice some further theories which have been advanced, as attempting the perfect explanation of gout. The acid nature of the transpiration, as indicated by the reddening of litmus paper when applied to the skin under gouty inflammation, has been improperly quoted to suit the theory of an acid matter being a proximate cause; for the same fact may be constantly demonstrated in the healthy action of the skin. In numerous trials which I have made to this effect (in cases even of long standing jaundice), I have not found an exception.\*

Barthez, a reputed French author on the subject of gout, appears to me obscure and perplexed both in his theory and practice; but his work contains much useful and interesting reference, and claims the attention of the medical reader.

He considers that the production of gout depends on two causes; the one, *a particular disposition in the constitution to produce a specific gouty state both of the solids and fluids; the other, a weakness (natural or acquired) which the parts appearing as the seat of the disease, suffer relatively to the other organs.* He does not attempt to explain a *proximate cause*. His hypothesis of *la situation fixe, in the muscular fibre and other textures*, does not convey to me any comprehensible idea. He entertains, after the example of Van Helmont and Van Swieten, the absurd notion, that the gout is a *contagious* disease. Amongst his varieties of gout, he includes the hot and the cold, according to the authority of Aretæus and Cælius Aurelianus, and from the ex-

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\* Berzelius remarks, "The matter of transpiration is always acid, and reddens litmus paper very distinctly."—View of the Progress and present State of Animal Chemistry, p. 95.



ample of Liger, a preceding French author. In this doctrine he refers the *hot* kind, to the disease when seated in the neighbouring parts most external to the joint; and the *cold*, accordingly as the disease, is more internal and deeply fixed; grounding this distinction also, on the particular effects produced by hot or cold applications to the affected part.

M. Guilbert, the latest French author\* upon gout, appears to me to have exceeded every other writer, in the *universality* of character which he has given to this disease; and in following his opinions, we should very readily range every nervous and spasmodic complaint, of a doubtful nature, under the head of anomalous gout. Also, some of the complaints of young children; various disorders of the adult; uterine irregularity; and the diseased condition of every texture of the body in a person gouty, or supposed to be so; would come within the convenient denomination of arthritic. In explaining the nature of gout, M. Guilbert states, that under the influence of causes which have impaired the functions of digestion and perspiration, and given rise to a condition of plethora, a matter, intended to be excreted, has remained; the lymphatic system is left obstructed (*engorgée*) with this matter, which becomes the matter of gout†. He seems quite contented with this easy assumption of *cause*, and next describes the various affections, which the matter in question produces. Of the practice recommended, I shall occasionally take notice. The work is certainly deserving of an attentive reading; although, according to

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\* De la Goutte, et des Maladies Goutteuses. Paris, Jan. 1817.

† Ibid. p. 195.

the impressions made on my mind, it abounds in romantic opinions, and unsound pathology\*.

Dr. Sutton, in a concise, but instructive Essay on Gout†, appears to believe that a peculiar secretion in the alimentary canal is the proximate cause; and that the disease, in its origin, is very local in its foundation. He remarks, "The symptoms attending gout give every reason to suppose, that its principal and exciting cause resides in the alimentary canal." And again, "The action of purgatives however, and their quick and decisive effects in subduing a fit of the gout, might lead to the inference, if other proofs were wanting, that this cause" (the cause of gout) "resided in the alimentary canal."

This pathology, although useful in the practice to which it directly leads, appears to me not only unsupported in its theory, but much too restricted in its views.

The practice simply of acting upon the bowels freely by common purgative medicine, does not adequately relieve the symptoms of a fit of gout.

The author gives the history of a paroxysm, which he considers to have yielded entirely to the influence of active doses of opium, by which the bowels were con-

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\* The substance of this Treatise has been translated with much spirit, from the French of M. M. Guilbert and Hallé, as drawn up for the Dictionnaire des Sciences Medicales in 1817, by James Johnson, M. D. ; and very lately published, by the same ingenious author, in a separate form, with his own observations, under the title of "Practical Researches on the Nature, Cure, and Prevention of Gout, &c. &c."

† Tracts on Gout, &c. by Thomas Sutton, M. D. &c.



fined at the very time that the symptoms give way. Is the preceding theory quite consistent with this conclusion? I am disposed to say, in comment on this case, that the gout is a constitutional disease, bringing into disorder the whole nervous system, and thereby inducing irritation, and many secondary symptoms, which require collateral treatment. In the paroxysm now alluded to, the anodyne treatment was followed by the use of an active purgative. It seems to me probable, that otherwise the symptoms would have returned. In every consideration which I am able to give the present question, no very limited theory, and certainly no one peculiar hypothesis, can be found applicable to explain the whole nature of gout.

Dr. Parry, in his elaborate work on *Pathology and Therapeutics*, considers that the gout is a disease depending on certain conditions of the circulating system; and offers it as one of the “exemplifications of salutary processes\*.” He speaks “of the final cause of the malady being merely the correction of the irregularly directed circulation†;” and further, as being a mode of “the evacuation of the habit, and the consequent reduction of a plethora, which is relatively excessive; and that another end, is the restoration of the due balance of circulation, previously determined in excess towards other and more vital parts‡.”

In this view of the subject, some general circumstances of the disease appear to be correctly comprehended; but the problem still remains, What is the peculiar condition of the system upon which the *specific* inflammation of gout depends? A preternatural afflux of blood to the affected part, is a condition of a general nature,

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\* p. 428.

† Ibid.

‡ Ibid.



belonging equally to any other inflammation depending on the constitution. This, indeed, might be assumed as the *proximate cause* of gout, if we considered the local characters as the whole disease, because it is the nearest antecedent to their occurrence. But such an hypothesis does not carry with it any explanation to the state of the constitution. The question under discussion is not, I conceive, more difficult than analogous questions as to many other kinds of inflammation; in relation to which we content ourselves with the general expression, that the tendency to a particular disease in an individual, arises from the peculiar predisposition of his constitution.

Although any definite and essential condition either of the solids or fluids, standing in the immediate and certain relation of cause and effect, to gout, cannot be demonstrated with the precision which may be desired, yet our information appears sufficiently complete, to conduct us to a clear arrangement in theory, and a solid foundation in practice.

I shall pursue the present investigation under the next head of my subject.

RATIO SYMPTOMATUM.  
OR THE THEORY OF THE SYMPTOMS;  
INCLUDING THE  
*Chemical History of the Urinous Sediments.*

OF great affinity to the last question, and nearly allied also in difficulty, is the theoretical consideration of the various symptoms of gout. It may, however, be entered upon with less danger from hypothesis; and as it involves many interesting phenomena, its discussion becomes important.

It will be useful first to bring under review, some general circumstances which are associated with the invasion of the disease.\*

The gouty, for the most part, have a circular form of chest; and, as we may infer, a corresponding capacity of lungs. Such is the structure most fitted for the production of the plethoric habit. In the early part of life, they usually exhibit the stamp of health. Their indulgent habits of living concur with the structure which I have described, in forming an excess of blood. In proportion, chiefly, as the habits of bodily exertion are inadequately active with relation to the plethoric state of vessels, does a state of corpulency take place. As already noticed under the head of *temperament*, they are not the truly sanguineous, but possess a temperament of a mixed character; so that the consequences of a redundant circulation rather affect the venous than the arterial system, and do not give rise to the strong actions of common inflammation. I must here again advert to the enlarged and distended veins, which are so commonly seen in gouty persons; and, in the lower extremities, often to a degree highly varicose. The hæmorrhoids are also a complaint in them, of frequent occurrence; and, when they are attended with much occasional hæmorrhage, may be considered as one of the indications of fulness and obstruction in the circulation of the vena portarum system.

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\* Those who possess the hereditary predisposition to gout in a strong degree, require only few of the adventitious aids towards the production of the disease; and in such persons, the exceptions which occur to the general statement which I offer, will probably be almost exclusively found.

I have met with several instances of patients, who state, that, previously to their being in any degree affected with gout, they were occasionally subject to epistaxis, or to hæmorrhage from the hæmorrhoidal vessels, in a much more remarkable manner than since; by means of which natural evacuation, we may consider that a fulness of habit was very much relieved, and further disease prevented. As an exception however to the advantage of the hæmorrhoidal discharge, I must refer to what I have already said at page 94.

While, therefore, the *vis medicatrix naturæ* can, in these or other modes, actively counteract the bad effects of plethora; or, as long as the powers of the general circulation are adequate to the establishment of a healthy balance; bearing a just relation to the quantity of blood requiring to be circulated, and adapted to all its ultimate purposes; the gout does not make its first invasion.

I know a gentleman, now about thirty-five years of age, whose case appears to me to afford an illustration of this latter position. His father was a martyr to the gout. He has the structure and temperament which I have just described, and is a free liver. At present his exercise is active, his strength is vigorous, and gout has not befallen him; but when the period arrives that his vessels lose their tone, his indulgent habits continuing, I expect that he will become a gouty subject.\*

This is a very general statement only of the question, and a closer view of it must be attempted. In a first fit

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\* In my first edition, I made this report. The gentleman in question has recently had occasional slight pains, some sense of heat, and just a degree of throbbing in the great toe, so as to give him some apprehension; but no visible symptoms of gout have yet taken place.



of gout, the plethoric state of vessels, either absolute or relative (of which Dr. Parry has taken ample notice), appears the predominant, and often the only circumstance which can be detected in the errors of the constitution. In the returns of the disease, more or less of irregularity in the functions of the abdominal viscera becomes conspicuous; and it gradually assumes a more complicated character. In a general statement of the fact, it may be said, that the plethora which exists is of a partial kind. That determination of blood to the extremities, which, in its peculiar actions, exhibits the phenomena of gout, becomes more and more obviously connected with congestion in the whole system of the vena portarum; with a vitiated secretion of bile; costive bowels; and unequal function in the kidneys.

The stomach is truly the medium through which the gout is created. Excess of ingesta, beyond the powers of healthy assimilation, and the supply of blood demanded for the useful purposes of the body, is the material foundation of the disease. In those instances of sudden and unexpected attack, when the patient considers himself in the most vigorous state of his health, he is pursuing free habits of living, and carelessly producing a state of repletion, which insidiously grows into a fit of gout. The increased specific gravity of the urine depending upon an increase of its solid principles, which constantly takes place in a paroxysm, appears to me one certain evidence that the blood-vessels are surcharged with blood, unhealthy in quantity, and probably also in quality. In addition to the excess of the saline ingredients of urine, so constantly found in the paroxysm, with relation to the time of health, the fact, of which I have obtained abundant proof, that *urea* is also excreted in preternatural quantity, deserves particular attention. In

several comparative examinations which I have made with reference to this point, I have invariably found that the urine secreted in the paroxysm, has furnished urea more abundantly than the healthy urine of the same individuals; and in some instances, its proportion has very much exceeded the measure of the general healthy standard. The excess of urea has, also, very remarkably corresponded with an excess of the phosphates; and hence additional evidence is afforded that the animalising principle (if I may be allowed the expression) too much abounds in the system.

A copious appearance of the pink or lateritious sediment, which is to be taken in connexion with an increased excretion of other animal principles, is an indication that the kidneys are secreting from the blood much unassimilated matter; and according to the degree and duration of this symptom, we are enabled to form a strong conclusion as to the magnitude and importance of abdominal visceral complaint. I consider that we are to view this preternatural secretion of the kidneys at once as the *sign* of disease, and as a salutary process, which Nature is performing, to relieve an overloaded and faulty state of the circulation of the liver, and the organs associated in its functions. I view this deposition, therefore, as a favourable circumstance, in a case, in which I have reason to be assured that there is an unhealthy condition of the abdominal viscera; but as the general and particular evidences of improved health appear, it is also then satisfactory that the urine should lose its sediment. I have repeatedly seen, that just at the commencement, and more particularly a few days before the invasion, of active symptoms of derangement of the abdominal viscera, the urine has been light in colour, and of low specific gravity; and when, by the salutary efforts of the constitu-



tion, and the influence of proper medical treatment, the kidneys have secreted with more freedom, the urine becomes of a deeper colour, and, in the space of a few days, more or less, begins to deposit sediment. This is now and then of a whitish appearance, consisting of the phosphates with mucus; but much more commonly it is pink or lateritious, containing chiefly uric acid, in variable proportions.

In a morbid condition of the digestive organs, assuming the chronic form, whether in a gouty patient, or in one not liable to the disease, we find this sediment deposited only in the urine of digestion; as in that of the morning, or in that which is passed in some given time after the dinner meal. In the most aggravated cases, the urine which is secreted in the middle of the day, and more especially after a draught of any diluting fluid, will scarcely afford any of this evidence; but in the acute paroxysm of gout, and when the liver is much in fault, every portion of urine throughout the twenty-four hours, although the patient is constantly and copiously drinking diluting fluids, deposits the sediment in abundance. In every inflammatory disease, the urine which is secreted bears a specific gravity much beyond the natural standard, although the ingesta consist only of thin fluids, which scarcely possess a nutritious quality; but this circumstance, together with the excess of matter which it can only hold in solution at a high temperature, is by no means so remarkable in any state of inflammatory action of the heart and arteries, as when the liver and organs of assimilation are immediately concerned in the disease; and of which we have the purest specimen, in a severe paroxysm of gout occurring in a patient, whose liver is obstructed and under some degree of chronic inflammation; whose state of vessels is



plethoric; and whose temperament approaches to the sanguineous.

Mr. Cruickshank, in speaking of the pathological sign of the pink-coloured sediment, remarks, "this peculiar sediment we consider as in some measure characteristic of diseased or rather schirrous liver." I must here observe, that, although this sediment is a certain indication of some error of the digestive functions, it does not necessarily denote so serious a state of complaint, as is here mentioned. In many instances I have seen it appear for a short time only, as an attendant upon transient derangement. In proportion, however, as its duration is continued, we must be led to believe in a faulty state of the functions of the liver; and if the sediment continue to take place for months, the inference, that some alteration of structure in this organ may have followed such continued derangement of action as is indicated, would present itself.

Amongst the indications of a redundant circulation, existing with a relative debility of vessels, I may state the occasional occurrence of apoplexy in gouty persons, as life advances; provided that the habits of living are improper; and that the regular action of the bowels is not carefully maintained.

How much the œconomy of the circulating system is concerned in the immediate production of a fit of the gout, is sufficiently exemplified in the following phenomena. Previously to the attack, sometimes for several days, the lower extremities are constantly chilled; and the symptoms of inflammation do not, under these circumstances, take place, until the patient has been some time in bed, when the circulation becomes more equalised. This is at least one explanation why the paroxysm usually makes its invasion about midnight. Also, I appre-

hend that from twelve to three in the morning the last stage of digestion takes place most actively ; the chyle is then freely entering into the circulation ; and the natural plethora of the vessels, if I may so describe it, is produced.

When the first symptoms of the paroxysm do take place in the day, it happens as a consequence of some sudden excitement of the heart and arteries, from excess in stimulating liquor ; as, after a convivial entertainment.

We are now brought to the general conclusion, that gout is a disease depending upon a redundancy of blood with relation to the powers of the circulation, particularly affecting the system of the vena portarum, and the consequent functions of the liver ; together with the production of a morbid change in the secreted products of the alimentary canal in general, and of the kidneys in particular.

In proportion as the constitutional susceptibility to gout is stronger or weaker, whether founded in hereditary predisposition, or derived alone from habits of excess in living ; or increased by the influence of the disease long established in the constitution ; so it is obvious, that a fit will be accordingly excited at a more early period of life, and will be reproduced by a greater variety of remote causes, and a slighter degree of their application.

Enough has already been said to explain the common existence of dyspepsia in gouty persons, the stomach being the organ first over-excited in relation to its healthy powers, in the original institution, and in the subsequent recurrences of the disease. The liver not only suffers certain injury in its functions from the same cause ; but it is also a fact, that a considerable proportion of gouty persons have the evidence of a bilious diathesis of constitution, both before and subsequently to the gout, as is proved in their being very subject to jaundice, and other



chronic irregular actions of the liver ; and occasionally, also, to cholera morbus. The pure, or mixed nervous temperament of the gouty, induces frequent and severe hypochondriasis, in connexion with the influence of an impaired state of the digestive functions.

When the gout has been frequent in its attacks, the sensibility of the nervous system is much increased, as is strongly exemplified by the various premonitory symptoms which mark the approach of a fit, and the numerous sympathies which attend its continuance. The prevalence of cramp in gouty persons, which occurs before and during the paroxysm in the most exquisite degree, is a strong indication of high nervous irritation. The agitation of the mind is much more remarkable than in any other inflammatory disease. The disposition to return at certain intervals (a character by no means so strongly marked in any of the other phlegmasiæ), although mostly to be referred to a periodical state of plethora, either general or partial, also shews how much the disease is connected with the nervous system, in which the laws of habit are centered.

Nervous symptoms of a distressing nature sometimes precede the occurrence of gout for many months, or even for a longer period. Of such symptoms, a palpitation of the heart, strange noises in the ears, or, as it were, in the head itself, are the most remarkable. The patient gives a strong description of these sufferings, which have a powerful influence on the spirits.

The inflammation and attendant pain and irritation of gout, affect the pulse in a great degree ; increasing its frequency, and in many constitutions causing it to be very irregular.

The influence of local causes in exciting a paroxysm is worthy of observation. A severe strain or contusion



in a gouty person, sometimes produces only common inflammation, as I have mentioned some examples to shew ; but, at other periods, is immediately followed by a fit. Mr. Hunter remarks, “ it is probable that the gout is not always an act of the constitution ; but that parts may be so susceptible, or rather disposed for this action, that they may immediately run into it when deranged.” The truth of this opinion appears to me in some degree questionable. The gouty inflammation is an external evidence of a morbid condition of the system. When from local injury in a gouty person, *common* inflammation alone is produced, I should infer the absence of constitutional gouty diathesis, and vice versa ; so that I would rather affirm that gout is always, in a greater or less degree, an act of the constitution. This also appears to me, both the safer, as well as the more just, conclusion to be adopted.

It seems beyond our scrutiny to point out the essential condition of the constitution, which respectively produces the several kinds of specific inflammation. Peculiar texture may be viewed as the entire source of the distinctive phenomena in the effects which arise from common inflammation, as we see in the example of a mucous, and a serous membrane. But this consideration does not illustrate the difference of the two diseases, *gout* and *rheumatism* ; as each disease is known to attack the same textures, with very different symptoms and effects. The argument, indeed, might be much extended in application to other kinds of specific inflammation ; in which, we see that each, although affecting the same textures in common, has its own peculiar laws of action.

It is unquestionably in the constitutional circumstances, that the grounds of our different pathology of these two diseases are to be found.

This part of my subject will again come under consideration in the sequel.

The uric acid constituting the chief ingredient in the composition of gouty calculi, has led to that universal pathology of the disease with many theorists, which I have already noticed. From the same source, also, the hypothesis has probably been derived, that the local action of gout is dependant upon the mechanical obstruction of the minute vessels: which was the favourite hypothesis of Boerhaave.

With regard to the curious phenomenon of the uric concretions, which occur in occasional examples of gout, it is necessary in this place to advert to the opinion which some entertain, that this local secretion of the capillary vessels is a constant effect of the gouty inflammation in all cases of the disease; and it is assumed that the *concretion* does not follow, necessarily, because the secreted matter may be removed by the excretion of perspiration, and by the action of the absorbent vessels. This appears to me an extreme argument, and forced far beyond the bounds of fair reasoning. It could not happen in this manner, as the fact really is, that so large a proportion of gouty persons, as I have mentioned, should pass through life under the martyrdom of the disease, remaining wholly free from all evidence of these concretions.

It is also to be observed, that in some of the few individuals in whom this peculiarity occurs, it is found that repeated years of gout have passed away, before any trace of the concretions was found to exist. This morbid secretion does not necessarily require for its production, an active inflammatory action of vessels, or, in other words, an acute state of gout. It sometimes takes place under the chronic form of the disease.

We continually meet with proofs of the capricious



action of the secreting vessels ; and of such anomaly, the gout, in the manner now stated, occasionally affords a striking example. We have no proof of the existence of uric acid in the system, independent of secretion ; or even if it were present, there is no apparent cause why it should not always be secreted by the kidneys, the glands obviously designed to separate saline matter ; or, why it should be thrown on the secreting vessels of the joints, or other distant parts.

I am quite confirmed in the opinion which I before expressed, that, in these cases, the capillary vessels of the part affected with gout may act *vicariously*, in a greater or less degree, to the secreting vessels of the kidney. In several examples of the existence of *chalk stones* both in the hands and feet, I have found, by repeated experiments, a deficiency, and sometimes almost total absence of uric acid in the urine ; in reference to the usual mode of obtaining it, by means of nitric or muriatic acid. I must add, however, that even in patients of this class, during the paroxysm, this principle has existed in the urine in considerable quantity ; and in some cases to the extent of a copious deposit of pink sediment.

In taking notice of the *local* phenomena of gout, in its ordinary forms of occurrence, I have first to advert to the fact, that the inflammation of gout almost constantly terminates *without suppuration*. Only eight cases of exception have occurred under my immediate care. In each instance, the result was curiously modified by an attendant secretion of urate of soda\*. Additional cases in which

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\* The nature of these concretions was first pointed out by Dr. Wollaston, who showed, with his usual clearness of demon-



suppuration took place, have been represented to me; but certainly they are of very rare occurrence.

The abscesses which are occasionally produced by the influence of the concretions, acting as extraneous bodies, must not be confounded with this description.

Ligament is probably the texture which is the most frequent seat of gout; but the bursæ mucosæ, the sheaths of tendons, and the muscular aponeurosis, together with the respective vessels and nerves of these parts, may also be enumerated as textures *primarily* affected. *Secondarily*, the cellular membrane and skin share in the effects of the inflammation. The textures just now mentioned, belonging to the functions of the joints, do not appear susceptible of the suppurative inflammation. In the cases which I shall relate of gouty abscess, the purulent secretion was formed wholly in the common integuments.

It is questionable whether adhesive matter (fibrin) commonly called coagulable lymph, is produced by the inflammation of gout. The thickened state of parts which is caused by repeated attacks, arises from a change of structure in the ligaments, the cartilages, the bursæ, and

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stration, that they are composed of uric acid and soda. (*See Phil. Trans.* 1787, p. 387.) Berzelius since speaks of them as *super-urates* of soda. I have just made an examination of five specimens of this substance, taken from gouty persons; and, in addition to the urate of soda, have in each detected the presence of a small portion of lime. One specimen was examined as follows: treated with dilute acetic acid, it exhibited a slight appearance of effervescence, and the solution was rendered turbid by oxalate of ammonia. Another portion, after incineration, and digestion in acetic acid, still afforded evidence of lime by subsequent treatment with nitric acid and oxalate of ammonia. Hence the inference that this concretion contained both carbonate and phosphate of lime, in minute proportions.

the tendinous sheaths ; and also from the morbid secretion of the two last textures.

Mr. Hunter observes, " The inflammation of gout is very different from the adhesive and suppurative in its sensation ;" and further, " local inflammations depending on the constitution seldom or ever suppurate."

This last observation is, I conceive, rather exceptionable ; and the explanation in question may apparently, with more correctness, be referred to the particular textures which are affected.

In gout, the inflammatory action of the vessels receives some abatement from the effusion, which in certain parts takes place abundantly, into the cellular membrane ; and, at the same time, the circulation is in a considerable degree restrained by the stricture of the vessels, which the great distension of cellular membrane and skin produces. Also some changes of sensation occur, in proportion as the swelling appears, and as the inflammation becomes more superficial. The severe sense of tightness, screwing, and boring abate ; the burning and throbbing, prickings and shootings, continue ; and the cumbrous sense of weight and numbness, with entire disability, increase. It may be stated, that the most painful situation of the disease is in the deep-seated affection of the ligaments, and before the swelling nearer to the surface, which is usually attended with redness, has taken place.

In the course of the acute symptoms, the nerves of the affected part acquire the highest state of tenderness and irritation. In no inflammation is the sense of throbbing so remarkable, as in gout. The pulsatory action of the minute arteries, which appears to be in part owing to the distension of the contiguous parts operating as a ligature, is increased to the feelings of the patient, by the preternatural sensibility of the nerves.

In many examinations by the thermometer, I have found that gouty inflammation, when attended with severe pain, produces a much stronger sensation of heat in the affected part, in relation to the real quantity evolved from the inflamed surface, than is caused by common or rheumatic inflammation.

To exemplify this fact, I shall offer the following statements.

### EXPERIMENT I.

W. W. has *acute gout* in the left foot. The temperature at the external ankle, which he feels as the hottest part, and describes to be "in a strong burning heat," is  $97^{\circ}$ ; two inches above, where he feels comfortable warmth,  $94\cdot5$ ; at the external ankle of the other foot, which is beginning to be affected with the gout, but is not, he says, "half so hot as the other,"  $96^{\circ}$ . Temperature in the axilla,  $99^{\circ}$ .

### EXPERIMENT II.

J. P. has *acute gout* in one great toe, with a sense of heat as if in boiling water; the temperature at the hottest part is  $84^{\circ}$ ; at the same part in the other toe, which is free from complaint, and feeling comfortably warm,  $83^{\circ}$ .

### EXPERIMENT III.

W. C. has *acute gout* (see CASE II.); April 15th. Temperature at the middle joint of the fore-finger near the abscess, which gives to the patient a sense of heat, as if a hot iron were in contact with the part, accompanied with throbbing, pricking, and cutting,  $94^{\circ}$ ; same situa-



tion in the fore-finger of the other hand, which is free from complaint, 70·5; palm of gouty hand, 93·5; palm of sound hand, 81·7; the last joint of the affected fore-finger, 94°; axilla in each arm 96·5; under the tongue, 99°. He remarks that each part of the fore-finger at 94° feels very much hotter than the palm of the same hand at 93·5.

Ditto, April 17th. Temperature of the last joint of the affected fore-finger now feeling warm, but not very hot, and almost free from the painful sensations before mentioned, 87·5; the same part of the other hand, which he describes as comfortably warm, 75·5; of the middle finger of the gouty hand, which is beginning to be affected, is not yet red, but is very painful, and gives him as much sense of heat as water nearly boiling would occasion, 75·5: of the same situation in the middle finger of the other hand, which is healthy, and to him feeling pleasantly warm, 69·5; palm of gouty hand, which has a much stronger sense of heat than the other palm, but is not expressed by him as painfully hot, 87·5; the other palm, 75·5.

#### EXPERIMENT IV.

W. H. has *chronic* gouty inflammation of the back of the hand; it is much swollen, and accompanied with a sensation as if a lump of lead were upon it, and affected with occasional numbness and prickings. The temperature in the middle of the inflamed part, 96·5; of the same part in the sound hand, 84°. To himself, the sound hand seems the warmest; but he does not complain of disagreeable heat from either.

## EXPERIMENT V.

J. B. has had chronic gout in one hand for two or three weeks past, with much increase of pain and swelling within these two days. The back of the hand the part affected. It pits much on pressure. The colour of the skin is dark blue. He complains of considerable heat and throbbing, and suffers severely from the sense of weight and tightness. He describes the fingers as constantly cold, and usually almost without feeling.

Temperature between the fingers of the affected hand,  $63^{\circ}$ ; of the back of the hand, where he feels most heat,  $86^{\circ}$ ; over the radial artery of this hand, where he has no unusual sense of heat,  $91^{\circ}$ ; at the back of the other hand, which is perfectly free from inflammation,  $74^{\circ}$ ; and between the fingers,  $68.1$ .

## EXPERIMENT VI.

J. D. has *chronic gout*. Slight inflammation of the right wrist, with some preternatural sense of heat\*, much thecal distension, so that the tendons seem matted together; the parts feeling tight, but scarcely painful, except on motion. Temperature at a spot near the radial artery, which he describes as the warmest part,  $95^{\circ}$ ; at

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\* It is to be considered, that in all these examples of gout, the examinations were made in the day time; a period of the twenty-four hours, at which, the several painful sensations abate more remarkably in this disease, than in the other kinds of inflammation.

the same part in the other hand, which is free from complaint,  $93^{\circ}$ ; and over the radial artery of this hand,  $94^{\circ}$ . His left foot is much swollen, and pits on pressure; towards the little toe the skin is vividly red, not very painful, and not feeling more than very warm. The veins of this foot are much fuller than in the other limb, and particularly so near the inflamed part. Temperature at the warmest spot,  $96^{\circ}$ ; at the same part in the other foot, which is free from complaint,  $93^{\circ}$ ; just beneath the ensiform cartilage,  $95.5$ .

In every instance in which I have examined, by the thermometer, the state of parts under gouty action, however slightly existing, I have found the temperature more or less increased. This is illustrated by the three following experiments.

### EXPERIMENT VII.

T. W. under the last stage of *acute gout* in the hand and foot. A little remaining redness of a dark hue; much pitting on pressure; but this is borne almost without uneasiness. Temperature between the thumb and finger, where most appearance of the complaint remains, but no particular sense of heat is felt,  $93.5$ . At the back of the hand,  $92.5$ . Between the thumb and finger of the other hand, which is free from complaint,  $92.5$ . Between the great and second toe, where very slight gout remains without sensible heat,  $89.5$ . At the ham of the same limb over the popliteal artery,  $88^{\circ}$ .

### EXPERIMENT VIII.

L. P. is convalescent from *acute gout* in the foot. Expresses a slight degree of preternatural warmth at the



ball of the great toe, where the temperature is  $84^{\circ}$ . Same part in the other foot, which is not affected,  $83^{\circ}$ .

### EXPERIMENT IX.

J.S. under the last stage of *acute gout* in the side of one foot, slight aching only remaining; the most uneasy part scarcely warmer to his sensations than the sound parts,  $86.5$ . Same situation in the other foot,  $83.5$ .

### EXPERIMENT X.

W. C. has *rheumatic* inflammation in one hand, chiefly at the wrist. He expresses that he feels "fever heat, with some throbbing, gnawing, and pulling," and appears in very severe pain. Temperature at the ulnar side of the wrist, where he has most sense of heat,  $92^{\circ}$ ; at the same part in the other hand, which is free from complaint, and comfortably warm,  $85^{\circ}$ .

### EXPERIMENT XI.

E. C. has *rheumatic* inflammation of one hand, and the whole of the wrist. She complains of pricking and shooting, and intense pain, and expresses the heat as that of hot water. Temperature at the most inflamed part,  $97^{\circ}$ ; at the same part of the sound hand, the skin of which she feels of temperate warmth,  $93^{\circ}$ .

## EXPERIMENT XII.

M. H. has a whitloe at the middle finger; much surrounding inflammation; vivid redness of skin; the sense of heat as if in water just warm. Complains of severe pain, of much tightness, and some throbbing. Temperature at the most inflamed part,  $83^{\circ}$ ; at the same part in the other hand, which has just been exposed to cold, uncovered,  $66^{\circ}$ . Palm of the affected hand,  $88^{\circ}$ ; palm of the other hand,  $69^{\circ}$ .

## EXPERIMENT XIII.

H. A. has an ulcer on the back of the hand, produced by a recent burn. The integuments are swollen, and pit on pressure; the skin vividly red; she complains of throbbing, pricking, and shooting, and describes the sense of heat as from scalding water. Temperature at the hottest part,  $94^{\circ}$ ; of the same part in the other hand, which she feels pleasantly warm,  $93^{\circ}$ .

It appears from these experiments that the sensation of heat (or of pain like that produced by a great degree of heat) which is experienced by the patient, even in gouty inflammation, corresponds rather to the degree of pain which is present, than to the thermometrical\* tem-

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\* In these experiments, I employed a delicate animal-heat thermometer, covering its bulb with a thick cork hollowed out for the purpose, with a notch to receive the stem. As in neither experiment, the temperature of the apartment was more than  $64^{\circ}$ , I have not noticed the exact degree.

perature of the affected parts; but it seems to me clearly proved, that, other circumstances being equal or nearly so, the gouty inflammation is productive of more intensity of sensation, both with respect to the heat and other sufferings, than in the contrasted examples of inflammation which I have offered. Haller considered the chief seat of the diseased local action in gout, as being in the nerves themselves. Without contending for the truth of this extreme position, which I consider too much an assumption, it certainly appears that the nerves are affected in a very remarkable degree.

In the case of inflammation from a burn, the subject of Experiment xiii, it is shewn, that, as in some of the examples of gout, the sensation of heat was much more excessive than might be expected to have been present from the indications of the thermometer. In this kind of injury, we know that the nerves, in common with other parts, suffer violent lesion, and high consequent irritation.

The intense degree in which the gouty inflammation affects the nerves, is further exemplified by the following curious fact.

J. S. having the gout in both feet very severely, when much swelling had not yet taken place, and suffering such pain and sense of heat at the time, that he could imagine his feet in a furnace, or that some one was actually forcing into them red hot spikes, accidentally dropped on the inflamed part, a piece of tripe immediately from the boiling kettle. The skin became instantly vesicated, but he was not sensible of any increase of heat in the part.

R. D. having gout at its height in one foot, with much swelling, accidentally received a considerable quantity of *boiling* water on the part. The previous pain and sense



of heat were only slightly increased; and, in this case, the cellular membrane being already extremely distended with serous effusion, no vesication ensued.

To the account which I have offered of the peculiar force of sensation which prevails in gout, I may add, in recapitulation, the subsultus tendinum, tremor of muscles, severe cramps, and the irritable state of the mind with occasional delirium, which commonly occur in a violent paroxysm; demonstrating altogether the acute sensibility of the brain and whole nervous system, which is connected with this disease.\*

I must not pass over entirely unnoticed, the circumstance of the desquamation of the cuticle from a part affected with gout, as the inflammation entirely ceases. Dr. Cullen notices it as among the characters of regular gout. In two hundred and thirty-four cases, in which I have examined this point, I find that seventy-eight patients have never experienced this symptom; not more than a few invariably; and many of them, in some fits, and not in others. It most commonly takes place from the feet when it does happen; next, as to situation, from the hands; now and then from the elbows; and scarcely ever in the least degree from the knees. Indeed I have never witnessed this occurrence, although I have heard it mentioned. Such exfoliation of the cuticle appears to be owing, in some measure, to the acrimony of the cutaneous secretion; but may, probably, in part, be referred to the distension which the integuments suffer, obstructing the free circulation of the extreme vessels; in

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\* Pliny, in Epist. xii. mentions the commission of suicide by his friend Corellius Rufus, on account of his severe sufferings from the gout; for which his physician had not been able to afford him relief!

which theory is to be included the distance of the affected part from the centre of circulation. Those who have almost always noticed the desquamation to result after a long fit, state, that if the symptoms have been quickly removed by medical treatment, this circumstance has not occurred. I must add to this statement, that it does now and then happen, that not only the skin changes, but even the nails, after a tedious fit.

*Of the Chemical Composition of the Urinary Sediments.*—A knowledge of the composition of the different sediments of the urine is so materially connected with the theory and practice of medicine, that I shall present, in the most compendious manner that I am able, some details on the subject; first taking notice of a refinement of opinion which has been advanced, respecting the peculiar acid existing in the pink sediment.

Proust\*, many years ago, endeavoured to prove that the pink or brick sediment, to which he refers, *as the substance which, during fevers, separates itself from the urine at the moment of its cooling*, consists in part of a distinct acid, different from the uric, and which, from its colour, he termed the *rosacic*. In order to determine the propriety of this conclusion, I have, in repeated experiments, examined favourable specimens, both of pink sediment, and of the red crystals (gravel); and of this comparative investigation, as relating to the present question, I shall briefly offer the results.

The crystals appear to be very little acted upon by boiling water, except sustaining some loss of colour, from the separation of animal matter; but if previously triturated to a fine powder, they acquire a considerable degree of solubility.

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\* Annales de Chimie, vol. xxxvi. p. 265.



The pink sediment, collected on the filter and dried, is found to be an impalpable powder. It dissolves, with the exception of one tenth of its proportion, in boiling water; but partly separates into the solid state on cooling. Nitro-muriate of gold added to either of these solutions (of the crystals, or of the pink sediment) while yet warm, instantly produces a purple colour, and a precipitate subsides; but the effect takes place slowly, if applied to the liquor when cold.

Each substance is readily soluble in pure potash; and, during the solution, apparently yields to the muriatic acid stopper, the white fumes characteristic of ammonia.

The potash solutions, by the addition of muriatic acid, precipitate small grains of a greyish white colour, which, when washed, and treated with nitric acid in the usual manner by evaporation, and carefully heated, afford the rose hue distinctive of uric acid.\*

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\* The rose hue which is obtained either from the crystals or the pink sediment, is heightened to a beautiful carmine by the addition of ammonia; and is rendered permanent in the evaporating dish for several weeks, if carefully dried and kept free from moisture. Without ammonia it more readily deliquesces, and assumes a yellowish green colour; but the former hue may be revived by heat; and, in a dry apartment, will continue a few days, more or less perfect. With or without ammonia, if transferred to paper, and preserved from light and moisture, the first tint is permanent. Lastly, the tint with ammonia, moisture being entirely excluded, remained unimpaired after daily exposure to light for about a month, when it began to fade.

Dr. Prout, in a very ingenious paper in the *Phil. Trans.* June 1818, has given the history of the substance formed by the action of nitric acid on uric acid, which he calls purpuric acid; and its combinations with the alkalies, he denominates purpurates.



The crystals, separately treated with nitric acid (more favourably if diluted), afford the rose hue.

Precisely the same result is obtained from the pink sediment.

Muriatic acid added to the watery solution of the pink sediment, previously filtered, produces a precipitation of minute whitish grains; which, washed and treated with nitric acid, afford the rose hue.

Nitric acid added to the watery solution, evaporated and heated, presents the rose hue.

From these experiments it appears evident, that the uric acid is a constituent of each substance, and that the theory of a distinct\* acid is not demonstrated.

The crystalline form of the one sediment, and the divided impalpable nature of the other, in addition to its easy solubility in hot water, are circumstances of difference which are necessary to be considered.

Mr. Cruickshank observes of the lateritious sediment, "We have examined several portions of this sediment, and have generally found it to be composed of lithic acid, phosphate of lime, and some peculiar animal matter but

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\* Subsequently to these experiments, I have read the paper on the rosacic acid, in the *Annales de Chimie*, No. 287, by M. Vogel, who concludes with noticing the similarity of the rosacic acid to the uric, and the easy transition of the one into the other, by means of the action of the acids. This fact alone, however, of its being changed indiscriminately by any acid, appears to me to invalidate his opinion, that the uric acid, and the rosacic so called, are distinct substances. All the facts which are stated, both here and by M. Vogel, seem to demonstrate, that the phenomena do not depend upon mere conversion of the pink sediment into uric acid; but upon a separation of the uric acid, from some principle with which it was combined.

little soluble in water. It has by some been supposed to consist entirely of lithic acid, but this substance for the most part constitutes by far the smallest part\*.”

I have derived the following results from my examination of different specimens of the pink and brick-coloured sediment. Neither of the varieties effervesces with muriatic acid, nor affects vegetable colours. Heated before the blow-pipe or in the crucible, each kindles, blackens, emits pungent fumes, among which, the odour of prussic acid is perceptible, and consumes to a greyish ash. That afforded by the pink sediment forms about a tenth of the original matter. The ash of each sediment changes turmeric paper to brown, renders violet paper green, and dissolves with effervescence in muriatic acid, it having been converted into a carbonate, from the decomposition of the uric acid by heat. Ammonia added to this solution, causes a white granular light precipitate. Oxalate of ammonia produces a white heavy precipitate. The ash, on being exposed to the atmosphere, does not deliquesce†. This ash is also considerably soluble in boiling water; and, on the addition of ammonia, affords

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\* Rollo on Diabetes, 2nd Edition, p. 449.

† In formerly believing that the ash was deliquescent, I conceive that, from some accidental circumstance, I must have fallen into an error. In the several specimens of pink and lateritious sediment which I have lately examined, I have not found the ash left from long burning, to be in the least degree deliquescent; and it has invariably reddened turmeric paper, proving therefore that the alkali was *soda*. My notice was directed to the particular examination of this last fact, by learning from my friend Dr. Prout, that Dr. Bostock had found urate of soda in the pink, and in the lateritious sediment.



by its precipitates, the evidence both of phosphate of magnesia and of lime. Hence it seems to follow, that the pink sediment is composed chiefly of uric acid in combination, and animal matter, on which the colour may be considered to depend; together with a small proportion of the usual phosphates of the urine. It appears evident that the uric acid exists in combination with soda, for which it has a strong affinity. I have constantly found, that the sediment which is of the deepest pink colour, affords the least residue on being burnt, and contains the least proportion of the phosphates; and that in proportion as the shade of colour is lighter, the ash which remains is more abundant, and consequently the phosphates also. We may, therefore, form a good presumptive conclusion of the nature of the sediment in the urine of a patient, from the colour alone. I have not found any difference of composition in sediments of similar external characters, whether procured from the urine of a person under gout, or any other disease connected with a faulty state of the digestive functions.

On examining the *crystals*, I obtained the same results as the above, except that the ashes which they left after combustion, were less than one-twentieth of their original weight, and consequently so minute, that when dissolved in an acid, they scarcely yielded a sensible precipitate on the addition of ammonia in excess. The two substances therefore appear to be very similar in their composition; and the probable reason why the uric acid does not crystallize in the pink sediment, is, that the animal matter or mucus discharged with it, so mixes with it, as to prevent it from assuming a regular form; for I have uniformly observed, that such urine as deposits the pink or lateritious sediment, is much loaded with a mucus-like substance; and that, on the contrary,



such urine as deposits the crystals, is almost free from this mucus.

I made an examination of a small calculus, which was passed by the uretha from a gouty person. For a considerable time before its expulsion, it had occasioned irritation of the bladder, and, for two days previously, excessive pain in the whole course of the cord on one side, and difficulty in the passing of urine. Since its discharge, he has been free from such inconvenience; but the urine has most commonly deposited the lateritious sediment. The calculus was of the size and form of a full lemon kernel. Its colour brownish red. On being divided, the disposition of its component parts appeared in concentric layers; the outer one yellowish, the inner brown; and within, a blackish substance appeared to be the nucleus.

The following were the results of my analysis. Almost wholly soluble in potash ley. Treated with nitric acid, it gave the rose hue. One grain boiled in distilled water left  $\cdot 4$  of a flaky yellowish residue; and this, on being burnt, afforded a white ash of inappreciable weight, which reddened turmeric paper; did not effervesce with an acid; and proved to be pure lime. The filtered water on cooling deposited a profusion of minute pellucid needle-like crystals; which, with nitric acid, afforded the rose hue. A portion of the water, concentrated with its solutions, on the addition of muriatic acid, precipitated minute grains, which also, with nitric acid, gave the rose hue. Pure ammonia added to some of the watery liquor produced a flaky precipitate, which, on trial, proved to be magnesia; and, with the filtered fluid, oxalate of ammonia instantly yielded the evidence of lime. Before the blow-pipe, the brownish red portion of the calculus blackened and gave pungent fumes. The blackish

nucleus-looking portion kindled with a faint flame. The ash affected turmeric paper, and effervesced strongly with muriatic acid. In this case, the uric acid, which, in the boiling process, was dissolved in the water, had been decomposed. The ash also afforded evidence of phosphate of magnesia, and phosphate of lime. Hence, with the exception of the presence of oxalate of lime, this calculus furnished results very similar to those of the lateritious sediment.

Since this examination I have met with three further examples of calculus of the shape of the lemon kernel, passed from the urethra by gouty persons.

I now come to speak of the nature of the whitish or yellowish white sediment, and white shining crystals, which, as to their external character, I have before described.

When urine, as it is first passed from the bladder, appears turbid, it may immediately be pronounced to contain the phosphate of lime, and the ammoniaco-magnesian phosphate, both suspended and in solution; and on the cooling of the urine, a part of the crystallized precipitate forms with some mucus into an iridescent pellicle on the surface, and also subsides to the bottom, forming the mixed sediment before mentioned. It is invariably accompanied by an abundance of mucus, which may be considered to be partly derived from the inner coats of the kidneys, but principally from the surface of the bladder; the arteries of these parts being excited to increased secretion, for the purpose of furnishing a defence to the bladder from such preternatural stimulus.

This urine, like that which precipitates the pink or lateritious sediment, is always of high specific gravity. It has been stated by authors, and it is the prevalent theory, that such urine is certainly alkaline; and the



conclusion has led to a rule of practice, which I shall have occasion to notice. I have applied the test of litmus paper, in at least thirty instances, to the most favourable specimens of urine of this description, and have invariably found it reddened in the usual manner. It is, however, highly animalised; very soon runs into the putrefactive process; and often contains such a remarkable excess of urea, that, even without concentration, from the application of nitric acid in the usual proportion, crystals of urea very soon appear.

In order to the examination of the urine depositing the mixed sediment in question, the following steps are to be pursued.

Filter the urine, and ascertain its specific gravity and other general characters. Collect the sediment from the filter, and adding diluted nitric acid to a small portion of it in the platina dish, evaporate it quickly over the lamp. Should the least portion of uric acid be present, the rose hue will appear, just at the moment when the evaporation is about to cease. From these trials, I have derived the knowledge that in every instance in which the sediment is entirely unaccompanied by red, reddish white, or pink, or pinkish white colouring matter, the uric acid is absent. The phosphate of lime thus treated, exhibits a greenish white appearance, which quickly passes into yellowish white.

We are now to presume, that the sediment consists of the phosphates; and this may be proved by digesting it in dilute nitric or muriatic acid. If the whole be dissolved without effervescence, and be again precipitated by pure ammonia, it evidently consists of the phosphates. The triple phosphate of magnesia appears in minute grains, and being of light specific gravity, chiefly floats on the surface, and adheres to the sides of the vessel;



while the phosphate of lime in small flakes immediately subsides to the bottom. I have invariably found the surface pellicle, which forms in urine depositing the sediment now under consideration, to be composed of the phosphates; and almost wholly of the triple phosphate.

Whether the white or yellowish-white sediment of the urine consists of rough powder alone, or of shining crystals, or of both in mixture, and involved with mucus, the following process, as more demonstrative, may be employed. I am aware that it is liable to some objections, where great accuracy is required; but, from repeated trials which I have had occasion to make, I can recommend it as affording a proof of the existence, and an useful presumptive evidence of the proportions of the two salts.

Subject the mass to a red heat until the animal matter is destroyed, in a platina or earthen crucible. Supposing that it consist of the ammoniaco-magnesian phosphate, and the phosphate of lime, the ammonia having been expelled, the ash will be composed of phosphate of magnesia and phosphate of lime. This ash is found not to effervesce with muriatic acid; nor to affect vegetable colours. It is now to be analysed. It may be put into diluted acetic acid, which quickly dissolves the phosphate of magnesia, only slightly affecting the phosphate of lime unless heat be applied. What remains, therefore, undissolved, after a few minutes digestion, may be considered as phosphate of lime.—To the phosphate of magnesia now in solution, add pure ammonia in excess; which, neutralizing the acid, combines with the phosphate, and unites to form the insoluble ammoniaco-magnesian phosphate; and this salt, first appearing on the surface, slowly subsides in small shining crystals. The remaining part of the ash is to be treated for phosphate of lime,

with muriatic acid and pure ammonia, as just now described. The urinary sediment in question kindles and blackens before the blow-pipe without flame; emits an ammoniacal odour; and partly fuses, and forms into very thin enamel plates.

In the analysis of a compound calculus, which not long since I had occasion to make, I found the following formula successful for the separation of the phosphates of lime and magnesia; but certainly the process is more troublesome than the occasion would, in general, make desirable. Clear presumptive conclusions are, in general, sufficient for our purpose, as to relative proportions.

<sup>a</sup> Boil the mixed salt with three or four times its weight of carbonate of potash in solution; filter the fluid, and wash the insoluble matter by repeated affusions of distilled water.

<sup>b</sup> Dissolve the residue which was left in the last process (carbonates of lime and magnesia) in diluted nitric, or muriatic acid, and decompose the solution by adding neutral carbonate of ammonia in excess, whence is produced a precipitation of the carbonate of lime.

<sup>c</sup> To the fluid from which the carbonate of lime has been separated, add a concentrated solution of phosphate of soda. The precipitate which now falls down, and which may be collected upon a filter, is the triple ammoniaco-magnesian phosphate; from the quantity of which, as well as of the carbonate of lime, the relative proportions of the two salts may be deduced.

<sup>d</sup> To determine the proportion of phosphoric acid (if desired), let the fluid which was left in the first process (<sup>a</sup>), be neutralized by the careful addition of nitric acid, so as only just to saturate the excess of alkali; and to the neutral solution add a solution of nitrate of lead, until a further addition ceases to produce a precipitate. The



phosphate of lead thus obtained, whenedulcorated upon a filter, dried and weighed, will serve to indicate the quantity of phosphoric acid contained in the salts.

The dark sediment, possessing a blackish green colour, and appearing chiefly crystallized, alone remains for description. It kindles before the blow-pipe, blackens, and, apparently from the peculiar animal matter which it contains, burns with a faint flame. To the ash obtained from sufficient burning in the crucible, add diluted acetic acid, as in the former case. The kindling before the blow-pipe has already led to the conclusion that the sediment contained oxalate of lime; and this will be confirmed on finding that the ash (if extreme heat have not been used) affords a strong effervescence on the addition of muriatic acid. The crystallized appearance of this sediment, together with the peculiar colour of its accompanying animal matter, distinguish it to the eye from the pink and lateritious sediment, which also furnishes, on burning, a carbonated salt. For the analysis of this ash, acetous acid is to be first employed, which proves a ready solvent for lime or its carbonate, as well as the magnesian phosphate. The acetic solution thus obtained, may be decomposed by oxalate of potash, which will separate the lime; and the subsequent addition of carbonate of ammonia will throw down the magnesian phosphate. The remaining steps of the operation for the phosphate of lime, may be such as have been already described.

The ashes of the different sediments which I have examined, have invariably left some particles of a matter insoluble in muriatic acid, even with the aid of heat; and which appeared to be silex.



DIAGNOSIS OF GOUT,  
OR  
THE DISCRIMINATION OF ITS PRESENCE  
BY ITS SIGNS.

*From Rheumatism*, the gout is to be distinguished not so much by any one mark, as by the concurrence of several circumstances. In the first fit of gout, it seldom happens that more than one part is affected; and still more rarely, that more than one part is attacked at the same moment. This solitary disposition of gout, as to its situation in the first attack, is a striking point of discrimination; to which may be particularly added, the adult age. In ordinary examples, the diagnosis is not difficult. The absence of distant premonitory symptoms, though occasional in gout, is almost constant in rheumatism. The remissions from pain and fever during the day, are much more distinct in acute gout than in acute rheumatism; and among the local characters which are striking in gout, the following may be selected:—A serous effusion into the cellular membrane, which takes place almost immediately after the invasion of the fit in the parts already enumerated (p. 30), and which yields a pit to the finger as the inflammation ceases, and in a slight degree even before this, when the skin is not extremely tense;—a turgescient state of the neighbouring veins, more marked and general than in rheumatism, sometimes appearing in the whole limb, and occasionally preceding the inflammation, a day or two, or even longer; the severe intensity of pain accompanied with extreme sense of heat and violent throbbing; the acute sensibility of the parts to touch, and particularly to any concussion; the excessive sense of weight, with numbness and total disability. A gentleman

relates to me, that, on one occasion, just as he was convalescent from gout, after partial exposure to damp, he was seized with rheumatism in both arms; the pain was agonizing, peculiarly gnawing, and seemed to him to be in the very substance of the bone. He described it as quite different from his usual pains of gout. I have witnessed several instances exactly similar, as to the contrasted sensations produced by gout and rheumatism; the latter existing in one part, and the former in another, at the same time; or, the rheumatism occurring as a sequence. The symptoms which I have recited, if not entirely distinctive, are strongly diagnostic. Sometimes the inflamed surface has a shining appearance as if varnished; and, occasionally, desquamation takes place, a circumstance which I do not remember to have seen in rheumatism, unless as the consequence of particular applications. Our diagnosis is further assisted by collateral considerations, such as those derived from the habits of the patient, the constitution of the parents, and the nature of those remote causes which may have led to the disease. For example, a young man, aged thirty, above the middle height, and slight; of the nervous temperament; had suffered two attacks, at distant intervals, of rheumatic inflammation of the ankle joints, with flying pains in different parts of the body. The local appearances were, a slight vivid blush of redness, and a distension of the bursal texture, but no œdema of the cellular membrane. The sensations were severe gnawing pain as if in the bone, with occasional pricking and shooting; but with scarcely any heat. About two months after a recovery from one of these attacks, and during which period he had been living indulgently in all respects (his circumstances in life being improved), and had become much more corpulent, the gout, for the first time, took place, affecting the



great toe and instep of one foot. I was much interested by the clear comparison which my patient himself drew between the rheumatism and the gout. "Now, the part was swollen to a great size; the skin shone as if varnished, and was uniformly of a deep red at first, and afterwards became rather purple; finally, the skin peeled off from the whole surface." In the rheumatism, he had not found any particular intermission of pain in the twenty-four hours; but in the gout, his extreme sufferings were from twelve to three in the morning, and about five he procured sleep. His sensations under gout were, "of heat, as if scalding water were poured on the part; throbbing, as if receiving blows; pricking and shooting much more intense than from his former rheumatism; and above all, a deep-seated sensation in the joint, as if the parts were undergoing dissection."

His father was subject to gout. His only sister has suffered severely from chronic rheumatism.

*From Erysipelas.*—The species, *phlegmonides*, can alone baffle the discrimination of the practitioner; and this only happens when it affects parts also liable to the gout. The inflammation in this complaint is more superficial than in gout, affecting primarily different textures, and is usually more disposed to spread. It is ushered in by stronger constitutional symptoms, as drowsiness, headache, and severe rigors, if the attack be urgent; if it be slight, the distinction may be deduced from the specific local characters. In erysipelas, the heat of the affected part resembles rather that produced by the stinging of nettles than the strong burnings of the gout; nor is there in erysipelas, the same disabled condition of the moving powers, as in gout.



*From phlegmon*, or common inflammation, the diagnosis can never be rendered difficult, except in a first case of gout; and even then, an attentive consideration of all the relative circumstances, constitutional and local, will remove every doubt.

*An inflamed bunion* is sometimes mistaken for gout; but more frequently the inflammation of gout at the ball of the great toe, is erroneously ascribed to the irritation of a bunion. To the experienced eye, the local characters will be sufficiently distinctive; and the diagnosis will rarely indeed be difficult, when every circumstance relating to the constitution is taken into consideration.

The evidence in a first attack is sometimes remarkably obscure. A gentleman disbelieving that his complaint was gout, desired his surgeon to search for a thorn in his toe, when he became convinced of his mistake.

## PROGNOSIS.

IN a first fit of gout especially, the favourable progress and termination of the symptoms are indicated almost solely by local appearances; and the event of first attacks is often so favourable, that the patient congratulates himself on the benefit which he has received, or at least expects to receive. In the severe and complicated returns of the disease, it affords a very different prospect. Mr. Cruickshank remarks\*, “In gout, the termination of the paroxysms is most perfectly indicated by a copious lateritious sediment; and when this suddenly disappears, and the urine at the same time affords a precipitate with

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\* Rollo on Diabetes, p. 449.

the muriate of mercury, a fresh attack or relapse may be expected."

If this statement were correct, the practitioner would be furnished with a very simple guide in forming a judgment of the case; but I have invariably found, that, except with very dilute urine, the muriate of mercury always produces a precipitate, even in health. With respect to the lateritious or pink sediment, it must be again observed, that its appearance and quantity are connected with the state of the alimentary canal, and of the circulation, and with the specific gravity of the urine itself. It begins and goes on with the fit, in a disordered state of the digestive organs, connected with some degree of inflammatory excitement in the system; and does not, as is sometimes stated, denote the close of the paroxysm, but the contrary. If, however, having disappeared, it again return, it certainly indicates, that the internal functions are not restored to health, and that, consequently, a relapse may be expected. The state of the pulse is in general a very faithful index of the degree of the gouty action; which, through the medium of the nervous system, has a powerful influence on the heart and arteries. The acceleration of pulse always takes place in acute, or active inflammatory gout. As the local inflammation abates, so does the pulse return to its natural standard of frequency, and become soft, losing the fulness and peculiar irritability which it possesses in the height of the paroxysm. In those instances in which the pulse intermits during the influence of the active symptoms, its returning regularity is a favourable circumstance.

On the subject of prognosis, I am induced to mention, among the favourable signs, the visceral organs being sound in structure, and not materially disturbed in their functions; an entire cessation of the sympathetic fever;



the tongue becoming moist and clean; a return of natural appetite; the fæces recovering and maintaining a healthy character; the urine *ceasing* to deposit sediment, and at the same time losing its high specific gravity; the nervous system becoming tranquil, and the spirits improved; the local sensations readily yielding in their severity to remedies, and the inflammation soon abating\*, and not shewing a disposition to quick transference from one part to another; or, if it be fugitive, not fixing severely in new situations.—The skin which has been affected, becoming pale and permanently cool, affords a favourable omen; and with regard to a desquamation of the cuticle, when it does occur, it may be considered as a strong indication that the inflammation is wholly removed from that particular part.

The pitting of the integuments on pressure, no pain being produced, is a favourable sign, as shewing the removal of inflammation. Some weakness of the part is a natural consequence of the inflammation; but I think it

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\* Dr. Hamilton (Letters on Gout), who assumed an opinion that the disease “depends on a fluid matter *sui generis*,” speaks of a sweat issuing from the pores of the skin at the inflamed part, as the first sign of the resolution of the inflammation. He adds, “This discharge from the pores is accompanied with a very peculiar fœtor, which is the first and strongest proof, that is obvious to the senses, of the existence of the genuine gouty fluid.” He pursues this idea of gouty effluvia at great length, and affirms, that it is “like no other existing in nature.” I have met with a few instances to which the patient has made mention of an odour of this kind, but they have commonly described it as proceeding from the general surface of the skin rather than the particular part; and I can only consider the occurrence as the effect of a cutaneous secretion peculiar to the idiosyncrasy of some persons.



a suspicious circumstance as to relapse, when a greater degree of weakness remains than can be reasonably accounted for.

In proportion as the opposite circumstances are observed to take place, we have, according to my experience, the assurance of a tedious and difficult form of disease; and among the unfavourable signs, I consider the strongest to be, a quick transference of severe inflammation from one part to another, joined with painful sympathy of the stomach or the head; with irregular fever; and with exquisite sensibility of the whole nervous system. I must also add, that, in every case, in which the internal secretions fluctuate between the condition of health and disease, we should give a guarded prognosis as to the probable period of true recovery. Until I had acquired considerable experience (that powerful corrector of the judgment) in the management of a severe gouty paroxysm, my expectations of an uninterrupted convalescence were sometimes sadly disappointed by a troublesome relapse. The chief grounds on which the prognosis is to be formed, are, an attentive observation and accurate knowledge of the state of the respective secretions. When they are become *permanently* healthy; when all local complaint, except some weakness, has disappeared; and when, in conjunction with such change, the tranquillity of the nervous system is restored; we may look with confidence to the stability of the cure.

I shall state cases which exemplify the most remarkable causes which give rise to relapse, and which serve to shew the prudence and the necessity of giving a guarded prognosis.

## TREATMENT OF GOUT GENERALLY CONSIDERED.

THE prohibition of Sydenham against the least interference in the paroxysm, long exerted a powerful influence on medical practice; an influence which continues to this day to have considerable force. It is obvious that he derived all his opinions from the doctrines of the humoral pathology, which at that time pervaded the whole theory of medicine. His practice, as he himself declares, was still more rigidly cautious in the gout, "than in most other humoral diseases." In this disease, he says, "Nature seems to have the prerogative to expel the peccant matter according to its own method, and throw it off from the joints, there to be carried off by insensible perspiration." In his *Treatise on Gout*, he equally deprecated "bleeding, purging, and sweating, the only three ways proposed of expelling the morbid matter;" but in a subsequent treatise, "*Of Bloody Urine, from a Stone in the Kidnies*," he expresses the following qualification: "With respect to purging, therefore, in the case of bloody urine, provided only manna be used according to the method above delivered, I must retract an assertion I formerly published in my *Treatise on Gout*; namely, that it is absolutely improper to purge gouty persons, either at the beginning, declension, or in the intervals of the fits: for I did not recollect then, that the fit, which I feared might be occasioned by the purgative, might be prevented by giving an opiate at night." He still adds, however, to this passage, "If the gout only be attended to, all manner of evacuations are very pernicious therein, and therefore not to be used, unless the above-mentioned symptoms require them."

Much, then, as the moral sentiments, and the general superiority of this amiable Physician command our admiration, it would be unworthy of the great improvements with which time has since enriched our art, if we should continue fettered by the peculiar doctrines which I have quoted, and remain content to yield the cure of gout to *the nurse* alone. I freely admit what I have already stated, as a general position, that Nature is seeking a remedy for herself in a fit of the gout; and, also, that if her purpose were always accomplished with as much success as in a *slight* first fit, the physician might with propriety stand by, as a looker on merely, admiring the *vis medicatrix Naturæ*. But, in truth, the disease not only returns frequently, but returns with constant increase of strength; and the remedial efforts of Nature, which were at first so satisfactory, become tedious, irregular, and uncertain. The gouty sufferer, gradually reduced to lameness; constant pain, and many secondary evils, suffers at length the fate described by Lucian, thus expressed in the Latin translation:

“ Multæ formæ infortunatorum,

“ Meditatio pœnæ, et consuetudo,

“ Podagros miseros consolentur.”

Sydenham himself, in the feeling description which he drew of “the racking pains, unfitness of motion, and other disorders which afflicted him during the greatest part of his life,” was a striking example of the imperfection of Nature considered as the physician, and of the erroneousness of his own doctrines of practice. Several instances have come before me of patients, who, being prejudiced against every kind of interference with the



gout, have left the paroxysm to its own course. A few, of strong constitution, and being accustomed to have the disease mildly, do not appear to have suffered any serious inconvenience from such proceeding; one has now and then appeared, who has praised the gout; but the majority have found ample cause to regret their neglect of regular treatment, either in the injury sustained in the general powers of the constitution; or in the textures which have been affected with inflammation; or in both ways.

Lately I saw a gentleman, who, in his second fit being attacked in both feet, and one hand, hailed his visitor with satisfaction, and cherished his pains with flannel; resolved to be the patient of *Nature* alone. Six months had already elapsed when he consulted me; and even then, his tongue was furred; the secretions from the alimentary canal and kidneys were in a very unhealthy condition: he was lame in the feet, from the weakness of the ligaments, and the distended state of the bursæ, and of the sheaths of the tendons; and his hand was almost useless from weakness, and the contracted state of his fingers. All this state of evil gradually yielded to a suitable plan of general and local treatment; and this gentleman fully admitted the propriety and benefit of medical assistance in the gout, as much as in any other disease.

Under the artificial condition of man in social refinement, Nature is not always able (and seldom indeed permitted) to employ the wisest, shortest, or safest methods of cure. I trust that we are paying her sufficient respect, in attentively seeking to discover the kind of evil which she has to remedy; in taking all her indications for our guide, and acting truly as her servants; but not with *fettered hands*.

I would assume it therefore as a principle, that we should attempt the prevention of a fit of gout, if warned of its approach ; and interrupt its progress when formed, *unless* such a state of the constitution exist, that the gout has taken the place of another more serious disease ; or may be expected to prevent one which is threatening, and more to be dreaded than itself ; but even in this case, it is incumbent upon us to moderate the violence of symptoms ; to study and fulfil particular indications ; and carefully to estimate the balance of the present evil, with the expected good.

In the view which I have taken of this part of my subject, I shall first consider,

### THE TREATMENT OF THE PREMONITORY SYMPTOMS.

THESE may sometimes be remedied with the effect of averting the threatened attack ; and even when from the state of the system, in concurrence with general causes, this preventive object cannot be accomplished, the paroxysm will be rendered milder, and more tractable, by the previous removal of evident causes of irritation. Much may be effected by timely anticipation of that relief to the constitution, which Nature is about to attempt.

If the true inflammatory diathesis be present in any considerable degree, general bleeding should be employed ; or, if congestion be indicated in the vessels of the head, or liver, or other internal organ, without the action of the pulse being increased scarcely beyond the usual standard, local cupping will be more advantageous. A tendency to hæmorrhoidal discharge which is of a sa-



lutory description, should be promoted. With this view, aloetic and saline purgatives may, with great advantage, be administered in conjunction. The costiveness, which is so usual a fore-runner of gout, should be removed by an active purgative; and, with this intention, calomel, with antimonial powder and the extract of colocynth, at bed time, followed by sulphate of magnesia with infusion of senna and some aromatic tincture, in the morning, produce very good effects. Or, in place of these medicines, the more particular treatment, which I shall speak of under the head of Prophylaxis, may be adopted. If a furred state of tongue, with *heart-burn*,\* nausea alternating with a craving appetite, and acid eructations, be present, an emetic of ipecacuanha should be administered. If the threatening symptoms continue troublesome, we are to consider that the constitution is labouring under the causes of the paroxysm, almost as much as if the full symptoms had actually arrived; and a great part of the same treatment which I shall presently have to describe for the paroxysm itself, must be adopted. In numerous cases, I have, in the most satisfactory manner, entirely prevented an attack, which, according to all former experience, would certainly have taken place, severely. If, after the employment of suitable evacuations, the internal secretions continue to assume a vitiated appearance, as indicated by the state of the fæces and urine, already described, small unirritating doses of

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\* A medical gentleman, who has had severe fits of the gout, informs me, that he has often taken warning from these symptoms; and considers, that, by prompt appropriate remedies, and subsequent regimen, he has completely succeeded in averting a threatened fit on several occasions.



mercury, administered at a proper interval, according to the principles of Mr. Abernethy, and a gentle aperient once a day, with or without the addition of a stomachic bitter, according to circumstances, will constitute an efficacious mode of treatment. Alkaline medicine has its advantages, but produces only palliative relief, unless the bowels are also excited. Particular indications are to be met by corresponding remedies; but to the use of medicine should be joined careful moderation in diet\*, or, on some occasions, a course of rigid abstinence; horse and foot exercise in the country air; repose of mind from anxious employment; early rest, early rising, and early meals; in one word, all the *lædētia* should be changed for the *juvantia*.

I have now to offer the arrangement which I have attempted.

## OF THE TREATMENT OF THE PAROXYSM.

IN our choice of remedies for the particular symptoms which appear in every individual case, we should reflect upon the kind and degree of the predisposing and exciting causes, by which the fit has been introduced; and our practice should be relative to such considerations, as well as to the age, constitution, and temperament of the patient.

I propose a detailed view of the several remedies which I have thought most deserving of attention, in the following order:

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\* Quæcunque parit repletio, inanitio curat.

*Of Bleeding.*—The employment of the lancet in gout is not allowable with the same freedom as in the other phlegmasiæ, in most of which it is our chief dependance. It usually happens in the gout, that the increased excitement affects the nervous system much more than the heart and arteries; or, at least, affects the circulation in a secondary matter, rather than primarily; and, as I have before stated, the redundancy of blood appears to belong rather to the circulation of the vena portarum, than to that of the general system. It may also be assumed as a practical fact, that this kind of partial plethora is more favourably and effectually removed by purgatives and diuretic medicine, than by the detraction of blood itself. With respect to the loss of blood from the system, as a remedy in gout, it appears to me wholly unnecessary for the removal of the local inflammatory action, to which other treatment proves very adequate. Nor does general bleeding, however freely employed, afford that relief to the local inflammation, and the pain more particularly, which might be expected. Of this fact I have seen many strong proofs.

A gentleman, aged forty-two, of full habit, but of the nervous temperament, subject to severe and protracted fits of gout, contracted a violent cough, with urgent sensations of soreness in the chest, from exposure to wet and cold. He was bled from the arm to the quantity of sixteen ounces: a blister was applied to the chest; and other usual means were adopted. In two days after, he was attacked with gout, which first affected the hands, and next, the knees and one foot, in succession. In this fit, and particularly on the day before the seizure of the knees, the thighs were very curiously affected with sudden disability, in such a degree, and in a manner so en-



tirely unprecedented, that he was infinitely alarmed with the dread of paralysis. He continued to suffer much from this extreme weakness of the lower limbs. His general languor, and depression of spirits, and of strength, were also excessive; to which were joined copious perspirations. In this case, the temperament of the patient, or probably in more correct expression, the peculiarity of constitution, rendered general bleeding, to the extent mentioned, a very unfit remedy. A moderate abstraction of blood, from the chest, or neck, by cupping, would in all probability have proved sufficient to relieve the inflammatory irritation of the lungs, without so material an expense of the general strength.

In the instance just described, it is true that the inflammatory action of the affected parts was less acute than on former occasions; but it seemed questionable, whether upon motion, the pain was less in comparison. The nervous restlessness was greater; and debility and depression, as already stated, were very distressing.

In one case, within my immediate knowledge, the patient was first attacked with inflammation of the liver, for which, from the urgency of the symptoms, seventy ounces of blood were taken from the arm in the space of thirty-six hours. In a few days, violent gout succeeded, and apparently not controuled in the severity of painful symptoms by the previous depletion. I am made acquainted with many instances in which bleeding has been employed for the relief of pleurisy in gouty persons, so as to reduce the constitution considerably, at which period, a fit of gout has occurred in a severe degree. I could relate many more instances in illustration of my present subject; and certainly the point in question is one of great practical importance. There are good grounds, therefore, for the objection to the general prin-



ciple of bleeding in gout, as relates to the relief of gout alone; but it has been carried much too far, and a prejudice of very ancient date has been established against taking away blood *generally* in the gout, under any circumstances.

When the inflammatory diathesis is strongly marked by a full hard pulse, hot skin, scanty and high-coloured urine, with costive bowels, general bleeding will certainly be indicated, as it would be were no gout present. And when any internal organ is affected with inflammation, the observations which I have just now offered of the unfitness of this remedy for the gout itself, alone considered, must not be allowed to have weight.—The greater indication must be obeyed. The quantity to be abstracted, and the repetition of the venesection, must be adapted to the urgency of the general inflammatory action; to the state of the affected organ; and to the effect produced. I may also add, that it should be in relation to the *powers* of the individual, rather than to his age, of which, if we judge medically by years alone, we take a fallacious guide.

In forming our judgment as to the propriety of this active instrument of benefit or injury, we should give a due consideration to any influence from exciting causes, of a temporary or transient nature, such as the effects of sudden excess at the table, or of the passions of the mind; and which effects may be removable by other means. But when, under a predisposition of the system to inflammation, wet and cold, or a continued course of excess in stimulating liquors, have excited the paroxysm, the inflammatory diathesis becomes more permanent. In the circumstances in which bleeding is a proper remedy, its *early* employment is a point of much importance. This remark has, indeed, a general application to the

treatment of any of the phlegmasiæ. When bleeding is improperly delayed, it will be found that the depression of strength resulting from the excessive irritation of the nervous system, counteracts its advantages in a great degree; and although timely practice is important in all the remedies which are to be adopted, it is so especially with this of bleeding, in the few instances in which it is required.

The advantages of bleeding in the gout, as a practice of familiar employment, have, I am persuaded, been much too strongly insisted upon by Dr. Hamilton\*, and Dr. Rush†.

Barthez, Guilbert, and Hallé, wholly condemn the practice of general bleeding in gout.

When there is tenderness to pressure in either hypochondriac region, not depending on a distended and faulty state of the upper bowels, but joined with strong indications of congestion in the hepatic circulation; or when marks of fulness in the vessels of the head appear predominant, the action of the pulse at the wrist not being increased, ample local cupping is to be preferred to the use of the lancet.

*Emetics.*—From my own experience I am not induced to advise their employment, unless an evacuation of the stomach in a full degree is obviously required, from its being pointed out by indications of irritating contents. The influence which acid matter in the stomach may have

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\* Letters, &c.

† Rush's Medical Inquiry and Observations, vol. v.

in exciting or aggravating the symptoms, is such as to claim our particular attention.

I saw the good effects of an emetic exemplified in one very striking instance. A man, just seized with the gout in the hand, was in severe torture, so that he writhed and cried with anguish, and at the same time was affected with nausea, and had a furred tongue. He took a full dose of ipecacuanha; and, on discharging from his stomach much acrid acid, of a greenish appearance, together with heavy mucus, he was so much relieved, that he fell immediately into a refreshing sleep; and although many other remedies became necessary for the removal of the paroxysm, this preliminary step was attended with great advantage.

In several other cases, I have prescribed an emetic at the commencement of the paroxysm, with benefit in relieving the stomach from its immediate state of error; but the symptoms of gout were not apparently controuled.

Dr. Small\* extolled, in his own case of gout, the use of an emetic, and gave the preference to tartarized antimony. This medicine he also gave with Peruvian bark, which, he says, in this combination acted very favourably as a mild laxative.

*Cathartics and Diuretics.*—On the choice and free employment of purgative and diuretic medicine, the successful treatment of the paroxysm chiefly depends. The least reflection upon the state of the system in gout, and how much it is connected with previous repletion, which exhibits its influence in various ways, and manifestly in

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\* Medical Observations and Inquiry, vol. vi. art. 20.



the secretions, will necessarily lead us to this method of practice. When the eau medicinale, hellebore and laudanum, and various other specifics, have been most successful in the paroxysm, the action has been powerful on the bowels. Many authors have given their testimony to the propriety of purgatives in the gout; and Dr. Sutton, to whose Tract I have before referred, ably enforces the advantages of this treatment actively pursued\*.

In considering the rationale of the evacuating treatment from the alimentary canal, in gout, we must refer to the pathological principles of the disease, upon which I have already expatiated; and in this view of the subject, the following intentions seem to be presented: to unload the bowels of solid accumulation, and excite vascular secretion and consequent discharge throughout the whole tract of the intestinal canal; to promote the excretion of vitiated bile, and remove also the acid matter and unhealthy mucus to which disordered digestion has given rise. In some degree we thus detract from the circulation at large, and more particularly from the vessels belonging to the system of the vena portarum. In imitation of Nature's efforts to remove redundant matter by the medium of the kidneys—an action, the existence of which I think myself entitled to infer from my expe-

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\* Purgative treatment is strongly condemned by the French physicians, evidently upon the mistaken principles of the humoral pathology, and the consequent apprehension of producing a weakened action, so as to impede the course of the gouty matter to the extremities. They allow the use only of very mild aperients, and particularly praise “un électuaire lénitif sulfuré.”

riments—we are to keep the corresponding treatment attentively in view; and I have invariably employed, with the greatest advantage, purgative and diuretic medicine conjointly; so that the exhalant vessels of the alimentary canal, and the secreting function of the kidneys, are stimulated to increased action at the same time. With this view, probably, some have selected elaterium; and, by Dr. Sutton, it has been advised in combination with opium. But when I reflect on the uncertain operation of elaterium, and its injurious violence occasionally, even in small doses, I can but consider, that unless in a sluggish state of bowels, which is also joined with anasarca swelling in the extremities, its active nature should be rather dreaded than chosen as a regular remedy in gout. Under certain indications, and within proper limitations, however, it is a medicine as useful as it is powerful.

In stating the kind of purgatives which I have found most favourable and efficacious, I shall offer, in as brief a manner as I can state, the general plan which my own experience has sanctioned, by its being attended with particular success. Occasional doses of calomel, in conjunction with antimonial powder\* and compound extract

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\* So far as my experience has gone, I am induced to give the preference to that preparation of antimonial powder called *James's Powder*. I have considered, that, in equal doses, it has nauseated less, and has yet acted with more certainty on the bowels, than the ordinary powder of the Pharmacopœia. As it comes from one individual source, it follows as a probability, that it should be a more uniform preparation, than what we meet with prepared in the usual way; and this conclusion will seem the more reasonable, when we reflect that antimony



of colocynth, fulfil, in the most useful manner, the first part of the intention which I have expressed; and they should be repeated each night, or each other night, according to the degree of vitiation which the bilious and other discharges from the bowels appear to possess; and according to the advantage derived.

For the purpose of co-operating with the medicines just described, so as to affect the bowels and kidneys at the same time, without nausea to the stomach, and with the least uneasiness to the bowels, I have experienced the most remarkable success from a draught composed of *Magnesiae* gr. xv. ad xx.\*; *Magnes. Sulphat.* ʒj. ad

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is a volatile substance, and being moreover the most active ingredient, the quality of the powder must be materially affected by the variable degree of heat, to which it is liable to be exposed.

\* It has been suggested to me, that the combination of the alkaline earth with the acetic solvent of the colchicum, appears *unchemical* and contradictory; and I think it necessary therefore to enter into some explanation of my views in regard to this formula. I find by experience, that magnesia and the sulphate, in conjunction, act very happily as a certain and easy purgative; and that the colchicum, brought to the state of a mere solution in water by having its acid menstruum neutralized, is in the most favourable state of preparation in which it can possibly be administered. A very small portion of magnesia proves sufficient to neutralize the acetic acid (becoming an acetate), and the remaining portion is left to act as an ant-acid in the stomach and bowels, and unite with the sulphate in the advantageous effects just described. When the patient is furnished with this medicine in quantity, for occasional use, I recommend that the magnesia be added to the dose at the time only of its being taken; as otherwise it adheres with much inconvenience to the bottom of the vial.



3ii.; Aceti Colchici 3j. ad 3iss.; with any distilled water the most agreeable, and sweetened with any pleasant syrup, or with 15 or 20 grains of Extract. Glycyrrhiz. When much feverish heat of skin prevails, and also when the deposition of pink sediment is abundant, I am induced to direct this draught with gr. xxvii of Potass. Carbon.\* accurately neutralized with fresh lemon juice; and, in this case, I prefer the carbonate of magnesia to the calcined; using a larger proportion†. When preferred, this draught may be taken in effervescence, by the prompt addition of the lemon juice in the usual manner. Either draught should be repeated at intervals of four, six, or eight hours, according to the freedom of its operation and the urgency of the symptoms; and I must dwell upon the importance of adapting the activity of this part of the treatment entirely to the degree of gouty inflammation which is present. However reluctant we may feel to lower the powers of the patient by general bleeding, we must not be restrained by any unfounded fears of debility, which may be entertained as to the present mode of reduction. Such apprehensions must be satisfied by those sound arguments of good practice, which the practitioner alone can demonstrate. The inconvenience of the operation will be abundantly compensated by the important advantages produced; and if any treat-

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\* The carbonate of potash is a medicine much to be preferred to the subcarbonate, which is a very impure salt; not unfrequently containing metallic impregnations injurious to health, derived from unfit vessels occasionally used in the process of preparation. I have detected both copper and lead.

† The carbonate loses exactly two-thirds of its weight, by the process of perfect calcination.

ment of the paroxysm is entitled to be considered *radical*, I am sure it is one which aims at the removal of those obstructions and vitiated actions of the visceral organs, which are the great supporters of the disease. In the advice even of particular remedies, it is obvious that I can only lay down general principles of treatment; but I may say, that the purgative and diuretic medicines in question should be actively administered, until the gouty inflammation subsides; and so long as the urine, which is first passed in the morning, retains a high specific gravity; or, as a rule of more easy application, so long as it deposits sediment. In proportion as improvement in these points is obtained, the frequency of repetition of the medicine should be lessened, to thrice, twice, and once in the twenty-four hours: but it should not be discontinued until all inflammation is removed; both the fæces, and urine\* acquire healthy characters; and the tongue becomes clean and moist. The fluctuation of improvement and relapse which a severe paroxysm of gout so often produces, must be watched with the best attention; and the use of effective practice should not carelessly be conceded to the first flattering marks of convalescence.

I thought formerly, that, in two or three instances of particular idiosyncrasy, the colchicum, although thus

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\* It is not sufficient to authorise a discontinuance of the medicine that the urine becomes healthy; or that the state of the bowels is merely for the most part correct. Even when every point of convalescence seems well founded, this or other alterative medicine, should be given at certain more distant intervals than before, rather than at once be laid aside. Upon this principle of treatment, I shall have further occasion to expatiate.



mildly exhibited, was too acrid in its operation to be continued, from its appearing to cause some distressing heat and irritation in the bowels. I believe this to have been the fact in one instance; but having watched the progress of some subsequent cases, in which the same suspicion had arisen in my mind, I have been led to the conclusion, that this symptom has arisen wholly from the morbid state of the secretions. Indeed this point has been rendered generally quite clear, because the irritation has ceased upon an improvement in the state of the bowels being acquired, although the same medicine has been regularly continued. The exception, therefore, which must occur to all general rules, scarcely ever applies, according to my experience, to the fitness of administering this medicine in the paroxysm, or when gouty action is in any degree present, agreeably to the rules which I shall offer, of combination with other general and particular treatment. I may affirm that this preparation of colchicum, in union with the other medicines, has never disappointed me in its effect, either to contribute to the production of watery evacuation from the bowels, or to increase the discharge of urine abundantly, or both. It also assists the excretion of bile; and its operation is remarkably easy and agreeable. I shall again have occasion to notice the grounds on which I prefer the acetic preparation of colchicum; but I may now further mention, that it does not tend to produce the least nausea or weakness of stomach; nor is the draught in question disagreeable to the palate.

I have occasionally administered the acetum colchici with the combination just now mentioned, in doses of two drachms; but I find more reason to be satisfied with the dose of one drachm and a half once in six hours, during the first stage of the most active symptoms; and as they



yield, I lessen the frequency of the draught, or reduce the dose to one drachm, also giving it less frequently even in this abated dose, as the gout continues to decline. For the last two or three years I have been in the habit of directing an extract obtained from the acetum colchici, by inspissation\*. I prescribe it in the form of a pill, usually in the dose of a grain, which is equivalent to a drachm and a half of the acetum. I have never, in any one instance, found it disagree in any respect, and I consider it a very useful and convenient form of the medicine. In particular instances when the sympathetic fever is abated, and chiefly when the state of the stomach demands more of a cordial aperient, I administer with this pill a draught like the following, instead of giving the one containing the acetum colchici alone:

Rx. Conf. rosæ gallic, ʒiss.

Aq. menth. virid. ʒxii.

Misce terendo et cola.

Rx. Hujus colat. ʒxi.

Tinct. cardamom. comp. ʒi.

Acidi sulph. dilut. g<sup>tt</sup>. viii.

Magnes. sulph. ʒi. ad ʒiss.

M,—Fiat Haustus sextâ vel octavâ quaquâ horâ sumendus.

Very rare occasions only, in the acute disease, will call for the preference of the more stomachic† purga-

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\* In order to secure uniformity in the medicine, I have hitherto prescribed it as prepared by Mr. Garden, chemist, Oxford-street.

† The London *gout cordial* is, I believe, composed of rhubarb, senna, liquorice extract, and aromatics, digested in proof spirit; and is very similar to the gout cordial of *Boerhaave*.

tives; which are probably often prescribed upon the theory, that an atony of stomach necessarily belongs to gout, as a primary character.

*Mercurial Preparations.*—The administration of mercury during the paroxysm, and more especially in the interval, appears to have been recommended by some authors from a theory of its *specific* operation; and by others upon more general principles. When employed occasionally as a mild alterative, at bed time, in conjunction with the use of a gentle aperient in the day; or, joined in a full dose with purgative medicine, this active agent has full claims to our regard. During the height of the acute symptoms, the combination of calomel, James's powder, and compound extract of colocynth, is the most efficacious evacuant, in conjunction with the draught, as just now stated. As an alterative, a small dose of calomel, or a few grains of the quicksilver pill, joined with James's powder; or a few grains of the compound calomel pill, produce excellent effects; but if any of these preparations be given in frequent doses, so as to excite mercurial fever, more or less of serious injury follows as a certain consequence, without any corresponding advantages. I shall mention three strong instances which I have witnessed of this general fact; but slighter forms of the evil to which I refer, such as increased fur of the tongue, and nausea, attendant upon an irritated stomach, and in union with much general nervousness, have frequently come under my observation.

In the case of one gentleman, who in three days took a quantity not exceeding six grains of calomel, in divided portions, at bed time, in conjunction with small doses of opium, while the bowels were daily acted upon by purgative medicine, a very severe salivation took place, at-

tended with high fever and irritation. The gout, which had almost quitted him, and had declined in the most favourable manner, was re-excited, and became more painful, intractable, and tedious, than almost any case which I remember to have seen.

In another example, mercurial inunction had been incautiously used by a gouty patient for a slight syphilitic complaint. The strong effects of mercury were produced, and a violent paroxysm of gout immediately ensued, which proved of unusual severity and duration. In a third case, the mercurial action, together with an attack of gout which seemed entirely *consequent*, produced such continued irritation and debility as proved fatal; the patient, however, I must add, at the time laboured under a diseased state of lungs. I have been induced to suspect, from these and additional facts, that gouty persons in general, are more easily affected by mercury than others. Whether or not this opinion be correct, I am persuaded that they require more than ordinary caution in the employment of mercurial medicines.

Upon this conviction, it is my invariable practice, in using mercury as an alterative with a gouty patient, to give it in a single defined dose at bed-time, each night, or each other night, according to the circumstances of the case; never to employ a large dose except as an immediate purgative; and very cautiously to avoid the excitement of mercurial fever and irritation.

I have met with some instances in which calomel, even in the most cautious doses, irritates and materially disagrees, although the *pilula hydrargyri* does not produce any inconvenience.

The influence of individual constitutions in regard to the effect of particular medicines, is strongly shewn in



the action of calomel. Some suffer from it distressing nausea; others a burning heat of the stomach; and a few experience more or less of cold shivering soon after taking it. With the majority, however, it acts very favourably; and many persons can employ imprudently large doses without inconvenience.

Now and then also James's powder acts in the most unfavourable manner, causing nausea and sickness, faintness, and the most distressing depression: yet examples of this kind are rare exceptions to the general rule of great advantage being derived from the proper use of these valuable medicines.

*Pretended Specifics.*—Of the unbounded list of boasted remedies for the gout, with which every age, from the earliest history of medicine, has supplied credulity, I shall notice, under the present head, a very few only, and those of modern date and having some existing repute. Wine of white hellebore with laudanum (which has been offered as *identical* with the *eau medicinale*\*) has gained considerable estimation with some practitioners, either as an active purgative, or as possessing *specific* properties. From some examples which I have seen of its operation, I am convinced that it is too dangerous a medicine to be familiarly employed, and also that it can seldom be given in free doses to the gouty patient, with any prudence. Even in careful and gradual doses, its accumulated action sometimes becomes alarming, and causes serious hyper-catharsis. In its severer effects, under a bolder administration, I have

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\* See Mr. Moore's Letter to Dr. Jones, on the Composition of the Eau Medicinale.

known it to produce, in quick succession, vomiting and purging, great depression of strength, spasms, and *burning* pain in the bowels, cold sweats, and, in some instances, tremors and faintings, and the very sensations of approaching death. I am informed, on good authority, of a case of gout, in which a saturated preparation of hellebore in alcohol proved fatal by its action on the stomach and bowels; and of another case, in which the patient died apoplectic, after a free use of the tincture of hellebore and laudanum. This termination was attributed, and with great apparent probability, to the stimulating properties of the medicine.

A gentleman informs me that in his last fit of gout, which had attacked him severely in the feet, he took the tincture of hellebore to the extent of three drachms, in divided doses, in the space of twenty-four hours, joined with laudanum. It caused profuse perspiration; and the operation on the stomach and bowels was most alarming. The griping was so severe, and the depression of the animal powers so excessive, that, he declares, he wished for death.

Dr. Woodville mentions, that, “upon opening those who have died by the effects of this poison, the stomach discovered marks of inflammation, with corrosions of its interior coat; and the lungs have been much inflamed, and their vessels much distended with dark blood\*.”

I have been lately consulted by a gentleman, who, on a former occasion, having gout severely in the knee, took Mr. Moore’s preparation of hellebore and laudanum, in correct doses, several nights in succession. With him, it does not appear that the medicine materially disagreed;

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\* Medical Botany, p. 276.



although he describes himself to have had unpleasant cold perspirations, and some depression of strength, which I consider should be referred to the medicine; but the most material point respecting it, in this case, is, that it did not appear to have the least controul over the symptoms.

Even when the tincture of hellebore acts with comparative mildness, it has occasioned, under my observation, in two cases of gout, considerable irritation of the stomach, causing a distressing sense of heat, a white tongue, with thirst, and, together with inflammatory excitement, much nervous depression. Finally, of this medicine, I am well persuaded, that in any form or combination, it should be entirely deprecated as a remedy for the gout.

The *gratiola*, or hedge hyssop, has been much extolled, and has, by some, been considered as the chief ingredient in the French medicine. I have employed a saturated tincture of the plant well prepared; without any satisfactory result; and indeed in the two cases in which I gave it free trial, it proved rather an inert medicine. An eminent practitioner informs me, that he has seen effects from this tincture very analogous to those of the *eau medicinale*, when that medicine acts mildly as a sedative.

The *colchicum autumnale*, or meadow saffron, has more particularly been asserted to be the essence of the *eau medicinale*. This is to be considered as the *hermodactyl* of the ancients, which formed an ingredient for many centuries past, in the most reputed formulæ for the gout\*. It was almost discontinued in medicine, and par-

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\* In Bernard's edition, Leyden, 1743, of a very old Greek MS. upon the Gout, written by Demetrius Pepagomenus at



ticularly as a remedy in gout, when Mr. Want, I believe, first in any public report\*, revived the attention of the Profession to its peculiar influence in this disease. From the many trials which I had made of the different preparations of colchicum in gout, I was convinced that this author had made too extravagant statements of the curative power of this medicine.

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the desire of the Emperor Michael Palæologus, who reigned anno 1282, and which appears to have been first rendered into Latin by Marcus Musurus, at Rome, in 1517, I find the following prescription :

“ *Compositio simplicium Pilularum purgantium.*—Aloes pars una; *hermodactyli* dimidium; *glycasini* aut *cinnamomi* quod *hermodactylus* stomacho sit infestus, dimidium; *scammoniae pulcherrimæ* sextans. Ex iis fiant pilulæ; denturque pro viribus, materiæ copia, et natura ejus medicamenti quod, datur, et tempore.”

In several other prescriptions in this little Treatise, the *hermodactyl* was the principle ingredient.

Quincy, in his Dispensatory, 11th edition, 1739, observes, of the colchicum, that “it stands so much in the esteem of some writers, as to be dignified with the name of *Anima Articulorum*, the soul of the joints.” “Because they believed it to be very efficacious in scouring the mucilaginous glands, and preserving them free from the lodgment of such gritty matter, as occasions the gout and arthritic complaints.” Quincy makes reference to many officinal preparations containing colchicum, and thence styled *arthritic*.

\* See Essays in the Med. and Phys. Journ. No. 185, &c. Previously to Mr. Want's Account of the Effects of Colchicum, I had made trial of the acetic preparation in the treatment of gout, in the combination which I have just now stated.

The effects which I witnessed from the operation of the tincture of colchicum and of the powder, were unsatisfactory. Very commonly the stomach became irritated, the fur of the tongue with attendant thirst was increased, and no certain action of the bowels occurred. I was convinced that this medicine was not entitled to the high appellation of a specific for the cure of gout.

On the present occasion I still think it incumbent on me to notice the papers of Sir Everard Home on Colchicum, published in the Philosophical Transactions\*, in which the author offers a strong recommendation of this medicine, and of the eau medicinale in common with it, as a *specific cure* for the gout. A recommendation so enthusiastic and general in its principle, and from such high authority, is, in my opinion, much to be lamented; it being calculated to prolong the popularity of that injurious medicine, the eau medicinale; and also to promote the exercise of empirical principles of treatment. Sir Everard observes: "For the cure of gout the eau medicinale of Husson has been most fortunately discovered to be a specific remedy, and it is now ascertained, by experiments on different people, that a vinous infusion† of the colchicum autumnale or meadow saffron, is equally so, and therefore the two medicines must be considered the same." The most substantial answer which I can give to the first of these opinions, will be found in the details, which I shall presently offer, of the effects of the eau medicinale on those gouty persons who have come under my care, and from

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\* Part II. 1816. Part II. 1817.

† "Made by macerating two pounds of the fresh roots in twenty-four ounces of Sherry wine, in a gentle heat for six days, the spirit being previously carried off by heat."



whom I have collected their own unbiassed reports. That the two medicines are to be considered “as the same,” is surely a very unsupported opinion, when it is made to rest only on the general assertion of a similarity of power in removing the immediate symptoms of gout. A general claim of this kind (in the desire to represent the *eau medicinale*) has been maintained with regard to many other medicines; as the wine of hellebore, and wine of laudanum; elaterium, guarded by opium; and, according to the opinion of some, even the *gratiola* or hedge hyssop: and, two quack medicines, called Wilson’s tincture\*, and Reynolds’ specific, may be added to the list. That all these medicines, except the *gratiola*, have usually, in different degrees, an immediate controul over the local symptoms of gout, I am well assured; and sufficient observation has taught me, that the tincture of *colchicum*, and the vinous infusion of the same substance, have also a similar influence; but, so far as I have seen, in a much less degree than the *eau medicinale*; and less than Wilson’s tincture.

Dr. Sutton, when speaking of the *eau medicinale*, states†, “When I became acquainted with the publication which announced its efficacy, I proposed to my medical friends a substitute for this secret medicine, and which should produce similar effects: this was elaterium,

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\* The proprietor of this medicine has lately published an octavo edition of his *Treatise on Gout and Rheumatism*. It is skilfully written for the purpose of recommending the sale of his tincture and pills. He incorporates with the account of his secret medicines, general views and general principles of treatment, chiefly derived from my *Treatise*. Sentences, and almost whole pages, are very frequently copied from my work without acknowledgment.

† *Tracts on Gout, &c.* p. 201.



in doses of one or two grains, with forty or sixty drops of tincture of opium. In one case, I soon had an opportunity of finding this remedy to be completely effectual; and Mr. Green, of Lewisham, administered it in smaller and repeated doses, in two instances, with the best effect; in one of them with such rapid success, that the patient thought he had taken the French medicine." It is well known that Mr. Moore's preparation with hellebore\*, was, for some time, considered to be the eau medicinale; and, doubtless, this belief was, in a great measure, founded on a comparison of the effects of the two medicines. I have traced a considerable difference in the usual operation on the system, respectively produced by all the various medicines which I have mentioned; although they have had so much, in common, the effect of procuring a *palliative* cure. The construction which should be fairly given to the term *specific*, deserves some discussion. Sir Everard Home, in his zeal to commend the eau medicinale, and the vinous infusion of colchicum, describes its power over gout, as corresponding in point of efficacy with that which mercury possesses over the syphilitic virus, with no other difference than that of being more rapid in its operation. Dr. Parr, in his Medical Dictionary, thus expresses his article, "*specifica* (from *speciem faciens*, peculiarly adapting) specifics. By specifics, are meant such medicines, as infallibly and on all patients, produce given salutary effects; acting by some unknown power on the disease, without being directed by indications. Such was the bark supposed to be in intermittents, and mercury in lues: such are the boasted remedies of the quacks. In general, however,

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\* Composed of three parts of the wine of white hellebore, and one of the wine of opium.

as sound science has increased, these vaunted specifics have disappeared, and we now find no remedy which does not, by some action on the system, point out the principles by which its salutary effects are produced." The very general success of mercury in destroying the syphilitic virus in the system, gives it a real claim to the title of specific. The Peruvian bark deserves almost the same general praise for its speedy and permanent controul over a regular intermittent fever. This, however, cannot be said of the eau medicinale; tincture of colchicum, and the vinous infusion; the preparation of hellebore and opium; elaterium and opium; Wilson's tincture; and Reynolds' specific. They do, in most instances, for a few trials, influence the local symptoms very speedily; but, so far from removing the cause of gout, they leave the disposition to the disease much stronger in the system, with less powers, it is true, to produce violent inflammatory attacks; and lead to the still more calamitous, because more constant, sufferings of the chronic form of the disease. The patient emphatically describes, that his feelings make him in constant dread of something worse occurring than the gout; which his constitution no longer seems able fairly to produce. With the effects of elaterium and opium, I am the least acquainted; but I have had abundant opportunity to know that each of the other medicines, sooner or later, disappoints the patient of his expected cure, rendering merely a palliative assistance, and keeping the disease dormant for a time only, so that it is left to prey on the constitution with more lasting and serious ill effects.

After my first report of the properties of colchicum in its different modes of preparation, I again made trial of the tincture, in two cases of gout situated in the feet. It produced, in each instance, very similar effects; the fur



of the tongue was increased, and there was much thirst. It acted on the bowels as an acrid purgative, causing remarkable heat and irritation, and also affected the kidneys as a diuretic, very favourably. The symptoms of gout yielded very soon, but returned after an interval of ten days; and the disappointed patients were desirous of other treatment. One very gouty person informs me, that in the summer season he took, every day for three months, six grains of genuine colchicum root dried. At first it affected the bowels and kidneys moderately, and he felt improvement in his limbs. Afterwards it had scarcely any sensible action. At the expiration of the three months, and first at the beginning of October, he was seized more violently with the gout, than upon any former occasion; and not adopting any medical treatment, he was confined, with severe symptoms of gout, to his chamber for nineteen weeks, suffering for three weeks great torture, equally day and night.

I have also witnessed the effects of the infusion recommended by Sir Everard Home, and am persuaded, that it is a preparation much to be preferred to the spirituous tincture. It has afforded palliative relief to many persons; for a time, to their satisfaction; to a few, more permanently; but I have been consulted by some, who have found all the ill consequences to the stomach from this infusion, which I have ascribed to the tincture, without any satisfactory influence being produced over the severe symptoms of the paroxysm.

A lady of irritable constitution, when under the influence of a severe paroxysm gave a full trial to this preparation. At first she received some relief to the symptoms, but this benefit continued only for a short time; and the ill effects of the medicine on her constitution were very considerable. It produced sickness even



to vomiting, which was followed by soreness at the pit of the stomach, loss of appetite, and exceeding nervousness and depression of strength. It is important to add, that, on a subsequent occasion, this patient took the draught which I recommended with acetum colchici without the smallest inconvenience, and with every satisfactory result, other treatment being also combined. Others have derived immediate relief from the infusion; but in most instances with which I am acquainted, the gout has recurred much more quickly than before. With some, the relapse has taken place almost immediately, and the repetition of the medicine has appeared of no satisfactory avail. Where this remedy has most succeeded, I have observed, that relapses have so much occurred, that the disease has gained in frequency what it has lost in force.

The wine of the seeds of colchicum is a less active medicine than the preparations from the root; but if administered in equivalent doses, it becomes a remedy of the same character, agreeing in some instances and disagreeing in others, and liable in my opinion to the full objection which I enter against seeking the active specific agency of colchicum in the treatment of gout.

I have had abundant opportunity to be acquainted with the present and ultimate effects of Wilson's tincture and of Reynolds' specific; but a slight notice of these nostrums will be sufficient.

One gentleman, who took the tincture very readily for many months, and was a warm advocate for its effects, relates to me, that the gout, which formerly observed intervals of at least three months, has, since the employment of this medicine, returned every ten or fourteen days. His previous favourite remedy was the eau medicinale;

and, from the similarity of the operation in his case, he considers the medicines to be of the same nature.

Another very gouty subject, usually having one severe fit in the year, in the first use of this medicine thought himself possessed of a most valuable prize, and in his joy almost disregarded the gout. But see the quick sequel! His relapses were frequent, and the influence of the tincture over the symptoms became weaker. He was without appetite; he suffered sensations of weight, tightness, and general oppression about the stomach and abdomen; and was highly nervous. At length, during even all the summer months, he was not free from actual gout for the space of a fortnight; and in vain did he seek relief from his former boasted antidote.

A gentleman of middle age, subject to severe attacks of gout, took the tincture with great relief to the immediate symptoms; but it caused confusion of the head as if he had taken opium; he was rendered remarkably nervous; and his stomach was sensibly weakened for a considerable time. The gout returned severely in a short time.

Another patient made use of this tincture with such perseverance, that upon an average he took a bottle a week for two years. He stated "that the gout seemed to be always flying about him, and came on rapidly with much pain if he discontinued the tincture." At length he was convinced of the fallacy of his dependance on this medicine. I saw him at this period, when he complained of much gouty aching and tenderness in the limbs; his nervous system was enfeebled; a pain and soreness at the pit of the stomach accompanied a loss of appetite; and now and then he was affected with a faint sickness.

A gentleman of irritable constitution, when labouring under very painful symptoms of gout, had recourse to this



tincture, and derived from it the same remarkable and speedy relief which he had experienced from taking the *eau medicinale*; but for several weeks after he suffered from great debility, nervousness, and loss of appetite. He felt so much weakness of stomach, that he was resolved never to repeat the medicine.

Most persons experience distressing sickness from the continued use of this tincture. At length, the sight of the medicine occasions a revolting nausea.

I could relate almost an infinity of cases in which this tincture has, after a time, entirely disappointed the hopes of the patient, and given him more or less cause of regret, that he has depended on its palliative relief\*.

According to the reports which I have collected, I find that Reynolds' specific, in small doses, does not produce certain influence over the symptoms; in large doses it often operates violently both on the stomach and bowels; but in no case, within my knowledge, even when most successful, has it done more than effect a short cure; and the patient has laid it aside, either with dissatisfaction or complete disgust.

As happens with all active medicines, this preparation acts very differently in different constitutions. One gentleman relates that, by mistake, he took almost the whole bottle at a dose, on going to bed. He slept profoundly through the night, and even at noon on the following day, could hardly be awoke. The symptoms of gout were almost vanished; but he suffered from constitutional debility, and from weakness of the bowels, for a considerable time.

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\* For additional authority upon the injurious consequences of using Wilson's Tincture, &c. I refer the reader to some Observations lately published by Dr. Williams.



Another gentleman experienced, from a moderate dose of the specific, the most profuse sweating, attended with faintness and debility; and for a considerable time afterwards he was affected every evening with pain at the pit of the stomach.

Upon the *eau medicinale*, I shall offer my observations at considerable length. Its credit appears truly to have declined so much in general estimation, that any laboured exposure of this baneful nostrum might appear unnecessary; but as it still finds some strong advocates, and as the panegyric bestowed on it by Sir Everard Home\*, must tend to encourage an inclination for this remedy, in the minds of those persons who are impatient of the rules of regular treatment, I shall endeavour to discuss its real pretensions.

In the first trial of the medicine, it proves in most instances a powerful palliative or short cure; removing the paroxysm as by a charm, and not unfrequently without any very sensible operation upon the stomach, or upon any of the excreting organs. This curative power of the remedy gradually lessens on repetition, and with many persons become entirely lost. Such disappointment occurs very commonly, even where its first agency produced the most flattering expectations. In one example of peculiar idiosyncrasy, which came under my observation, the patient reported that he had in a severe paroxysm taken six bottles (procured from the depôt) within a few weeks, and yet from this free use of the medicine, no sensible influence, either as to operation or relief, was produced. On the other hand, the capricious-

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\* I will not apologize for the freedom which I use in criticising the statements of this distinguished author: being well assured, that, from his zeal in science, he will court the contest of opinion, where any important truth is to be established.

ness of its action is now and then manifested by very alarming consequences, affecting the stomach and bowels with all the virulence of an active poison. Such opposite effects from the medicine may perhaps, in part, be attributed to accidental difference in its strength\*, but chiefly, I presume, to the modifying influence of constitution, in different individuals.

To the objection derived from the uncertain immediate agency of this medicine, although unquestionably it is one of great importance, we might reconcile ourselves with less difficulty, than we can to that of its insidiously leading to a train of subsequent evils; the former being only an inconvenience of a similar kind to that which attends the use of every active substance derived from the vegetable kingdom. When the eau medicinale does not immediately debilitate by the violence of its effects, it often leaves behind an impaired condition of the nervous system; so that the head is affected with frequent giddiness; the stomach with weakened digestive power, and frequent sensations of sinking and vacuity; the limbs, and especially the parts disordered in the paroxysm, are affected for many weeks with tremblings, numbness, and coldness, and very commonly with tedious œdema; these symptoms appearing variously in different individuals. The mind is distressed with exceeding depression; and some persons declare their general feelings to have been rendered miserable for many months, even from having made a moderate use only of the medicine. It tends also to render the bowels inactive, to diminish the alimentary secretions, and materially to weaken the functions of the liver. In the general character of the medicine, it may with truth be stated, that sooner or later, in proportion as

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\* In an old bottle of the medicine which I examined, the sediment, which adhered tenaciously to the bottle, was considerable.



it is freely employed, it leads to a broken state of health. Of its deleterious powers in a more immediate manner, I may offer the following examples.

In one case, the contents of a single bottle taken as a dose, so paralysed the stomach, that for many days it was scarcely sensible to the strongest stimulants. The patient was recovered with much difficulty, and remained for a long time in a state of serious debility.

Mr. Ring\* related an instance of its causing the death of a gouty patient, by the direct violence of its operation.

Dr. Gregory, the late distinguished Professor of Medicine in the University of Edinburgh, was fully convinced, from his own observation, of the injurious tendencies of the eau medicinale in gout. One of his patients almost fell a victim to the cholera which it produced. Another was soon affected with symptoms of hydrothorax. In the next attack of gout, this patient rashly repeated the medicine, and hydrothorax again followed. His health was as before fortunately restored by good treatment; and his lessons of future prudence were purchased at a sufficient price in the dangers he so narrowly escaped.

A few years ago, I was favoured with the following communication from Dr. Parry: "From the eau medicinale, I have seen in several cases great injury to the alimentary canal. In the majority, it has eased present sufferings at the commencement; has not diminished the actual quantity of inflammation; and, in process of time, has disappointed the patient as to its present effects."

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\* Treatise on Gout, p. 175.



I have now to offer some further, and more particular details.

### CASE I.

J. S. aged 55, robust and plethoric ; of nervo-sanguineous\* temperament ; gout first at 29, not hereditary. In one paroxysm, just on its decline, he took fifty drops. It operated mildly on the bowels, and its effects were delightful. Repeated it on several subsequent occasions, and believes that he has taken a dozen bottles. Gout returned every month or two since this use of the medicine, not so painful as before, but very harassing ; and, contrary to former experience, the stomach became much weakened, with severe symptoms of dyspepsia ; and the bowels were with difficulty regulated even by medicine. In every attack since, he has noticed abundance of the pink sediment in the urine.

### CASE II.

L. M. aged 59 ; formerly robust ; corpulent in the abdomen only, and constitution much worn ; of sanguineo-nervous temperament ; gout first at 25, not hereditary. Has taken the medicine many years past. It has always quickly removed the painful symptoms ; but it has been only palliative, as the fits which previously returned twice, or at the utmost three times in the year,

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\* Sanguineous the chief character, but mixed with the nervous ; and *vice versa*, when sanguineo-nervous is expressed.

have since taken place every four or five weeks. Last week took three bottles; half of one each night. The stomach was much nauseated every day, and on the morning following the last dose, he vomited so severely, that arterial blood came from the stomach; and this has happened before. Has recently complained of an unusual weakness in all his joints, and of an œdematous state of ankles towards night, which has much alarmed him. He looks very sallow and unhealthy, and is altogether highly nervous; much more so than formerly, but asserts that he does not consider his stomach weakened, or his digestion impaired.

### CASE III.

D. T. aged 46, robust and plethoric; of nervo-sanguineous temperament; gout hereditary, and first fit at 30; took the medicine in one attack, in full doses, with much less effect on the immediate symptoms than commonly happens, and considers that it produced such uncomfortable and even alarming feelings of the head, which continued very troublesome, that he would not be induced on any account to repeat the medicine.

### CASE IV.

T. B. aged 67, robust and corpulent, of the mixed temperament, was labouring under gout severely in the upper and lower limbs, so that the left hand only was free. Being extremely anxious to dismiss the fit as quickly as possible, on account of the calls of business, he had recourse to the eau medicinale. He describes

that he was lifted into bed like a log, and was suffering severe pain. He took a tea spoonful of the medicine. He awoke in four or five hours, quite free from pain, and in a copious perspiration. He slept and awoke by turns, easy and perspiring. In the morning he was afraid to move, but made the trial; and, to his astonishment, was able to get out of bed without assistance, and on the following day to go down stairs. The gout, however, returned severely in a fortnight; and finding that as often as he repeated the medicine, it proved only a palliative, he resolved no longer to trust to such fallacious assistance.

### CASE V.

C. L. aged 56; very corpulent and plethoric; of nervo-sanguineous temperament; gout hereditary, and first fit at 42. Having severe gout in one hand and both feet, and quite disabled, at six in the evening took three parts of a bottle; it almost immediately produced delirium, which became violent, but yielded to a profuse perspiration. It acted moderately on the bowels. At six next evening, could walk across the room even without a stick. The swelling and soreness of the parts remained a fortnight, but without much pain. For a long time unusually nervous. Fit returned in four months. Took, as the first dose, half a bottle, with much relief to the symptoms; but it immediately produced delirium, as on the former occasion. Four months after, in summer, again attacked, when he repeated the medicine. Has not resorted to it for three years past, and his final report is, that for some time after its use, he suffered much from flying pains in the head, with other uncomfortable feel-



ings; from dyspepsia; cramps; œdematous swelling of the legs with much weakness; and indifferent sleep. He became extremely corpulent; as already stated, the recurrences of gout were frequent; and since the discontinuance of the medicine, he adds, the fits have observed an interval of twelve or fifteen months, and his health has latterly, from regular medical treatment, become much improved.

### CASE VI.

T. F. aged 44; corpulent in the abdomen; of nervous temperament; gout first at 37, not hereditary. Four years ago, both feet and hands being attacked, took half a bottle at bed time; no particular operation, except a gentle perspiration; was so much relieved, that he could walk about the room next day. Much chronic gout afterwards, and in two months had a return of severe symptoms; then took four bottles in the course of the month. All acute pain again removed by the medicine; but says, that his limbs have been distressingly weak ever since, and much disposed to œdematous swelling.

### CASE VII.

W. J. aged 52; robust and almost of the sanguineous temperament; gout first at 49, not hereditary. Took one bottle at twice; it nauseated exceedingly, and acted much on the bowels; the immediate symptoms were quite relieved; but long after he suffered so much dyspepsia, and severe occasional spasms affecting the stomach, that no suffering of pain would induce him to take it again.

## CASE VIII.

D. W. aged 40; plethoric and corpulent; gout hereditary and first at 28. In a severe fit took the third of a bottle; in about four hours, the pain subsided into numbness; perspiration followed, succeeded by a sound sleep. Next morning walked down stairs; the head uncomfortable, tight and heavy; no effect on the bowels, which were confined; thinks it was diuretic. Some purgative salt removed the unpleasant feelings of the head. Not aware that the next fit returned sooner than usual; on its occurrence took half a bottle, its effects sudorific; on the following day was able to take a short journey in a carriage; next fit returned soon, and attacked both feet (the previous time one foot). Took a third of a bottle; it gave immediate relief. Gout returned very soon and very severely. Again took the medicine, when it acted both as a purgative and a sudorific, but only in a slight degree mitigated the pain. This fit, which lasted several weeks, left the head for a month after extremely uncomfortable; his feelings were wretched; had often *horrors*; was for a long time very dyspeptic, and suffered much from chronic weakness of limbs.

## CASE IX.

H. B. aged 62; robust, plethoric, of sanguineo-nervous temperament; gout first at 47, not hereditary; has taken the eau medicinale freely, and has been a great advocate for its effects, finding it always prove a quick palliative; but confesses that the fits, which formerly observed

distant intervals, have, since the use of this medicine, so much increased in frequency, that of late he is almost always more or less under the influence of gouty pains in the limbs.

### CASE X.

O. J. aged 60 ; slight in limbs, but corpulent in the abdomen ; of nervous temperament ; gout first at 25, not hereditary. Took the medicine three years ago ; half a bottle in the morning, the remainder in the evening ; says that it proved almost fatal ; producing constant nausea and violent pains in the abdomen, without any effect upon the bowels for five days. The paroxysm was very much relieved. Concluding that he had not taken the medicine properly, he resumed it shortly after, both for the purpose of removing the remaining symptoms, and to act as a prophylactic ; but the gout returned soon, and with its usual severity.

### CASE XI.

T. K. aged 57 ; corpulent and plethoric, of nervo-sanguineous temperament ; gout hereditary, and first fit at 30. When attacked severely in the feet, took one-third of a bottle ; it produced much delirium, and excessive perspiration. Opium affects his head in the same manner, in a slight degree. Next day he took the remainder of the bottle with a similar effect. It did not disturb the stomach and bowels. No relief to the symptoms. At intervals only of a few days, he took a second and a third bottle in divided doses, being resolved to give full



trial to the medicine. Again the same effects as before but in a less degree. The gout not checked in its course, and it progressively attacked the feet, knees, hands, and elbows. Relates, that, after the third bottle, he seemed to gain some motion of the fingers, and felt that the medicine was searching every part; yet the fit was of six weeks' continuance, and, upon the whole, not apparently relieved by the medicine.

### CASE XII.

C. L. aged 51, corpulent and plethoric; of nervo-sanguineous temperament; gout hereditary, and first fit at 42. In a severe attack, took at first half a bottle. It nauseated much, caused great perspiration, acted strongly on the bowels, and removed the pain in three hours. Took the remainder of the bottle, at divided doses, within the next three days. In four days could just walk without assistance. Has taken altogether six bottles, dividing each into four doses. Does not think his stomach particularly weaker since, or that he is more nervous; but reproaches the medicine with having caused an extraordinary frequency in the return of his gout.

### CASE XIII.

P. A. aged 28, moderately robust; plethoric, of sanguineo-nervous temperament; gout first at 21, not hereditary. In a severe attack, took a bottle at two doses; it nauseated very much, but had not any other operation, and did not relieve the symptoms.

## CASE XIV.

T. W. aged 41, formerly rather stout and corpulent, but now thin, and much worn in constitution; truly of the nervous temperament; gout first at 28, not hereditary. Has taken three bottles; the first at twice, with an interval of a few hours. It produced very severe cholera. The stomach was left remarkably weak for some time. The affected parts were relieved from pain almost immediately, yet remained a long time much debilitated. The second bottle acted as before, but less severely, and had not much influence on the symptoms. Never suffered in the loins, as he has done of late severely, before taking the medicine. The third bottle had less operation than the second, and did not in the least degree influence the painful symptoms.

## CASE XV.

C. W. aged 64, robust, corpulent, and plethoric; almost of the true sanguineous temperament. In a severe attack, took a bottle at two doses. It produced much perspiration, but no other sensible operation. The symptoms which were at first relieved, returned in a few days, and continued more tedious than on any former occasion; indeed he was hardly free from them before a fresh fit took place. For some time, "lost the natural feelings of his feet very remarkably. They were so cold and benumbed, that he feared he should never recover their use."

## CASE XVI.

L. S. aged 46, corpulent and plethoric, of sanguineo-nervous temperament; of highly bilious diathesis; gout hereditary, and first at 35. Began the medicine three years ago. It acted as a narcotic, producing sleep; caused some perspiration; and affected the bowels moderately. One bottle removed the painful symptoms of the paroxysm, leaving only weakness; but the general debility was also considerable and of long continuance, attended with many nervous symptoms. On a second occasion took another bottle in divided doses, which left behind still more remarkable debility; and, for a long time, much trembling of the hands and knees.

## CASE XVII.

S. B. a female, aged 50, corpulent, plethoric, and of nervo-sanguineous temperament; gout hereditary, and first at 47. In the first fit took one bottle in three doses, without any marked operation, and with slight relief only to the symptoms.

## CASE XVIII.

C. T. aged 48, robust, plethoric, of strong bilious diathesis, and of sanguineo-nervous temperament. Gout hereditary, and first at 40. In an attack of both feet, took half a bottle with much relief to the symptoms. It acted as a purgative. Contrary to custom, the paroxysm returned in the same year. Repeated the medicine,



taking a bottle at twice with only a few hours interval. It now acted as a strong poison, producing severe cholera. His stomach was left for a long time much weakened, his limbs very œdematous; and, in mind and body, he experienced a depression and languor, which he had never before known.

### CASE XIX.

W. M. aged 42, slight, and of the nervous temperament. Gout hereditary, and first at 28. Has taken several bottles of the medicine. The first gave immediate relief; it acted slightly as a purgative and diuretic. In the subsequent use of it, the paroxysm became so slightly relieved, and returned with such unusual frequency, that he gave up the remedy in despair. He adds, that it rendered him very bilious, highly nervous, and his limbs became exceedingly weak and much affected with cramp.

### CASE XX.

S. J. aged 41, of nervo-sanguineous temperament; gout first at 30, not hereditary; very subject to violent attacks of the disease. In the beginning of a paroxysm, took a bottle in two doses; and not finding the smallest relief, did not persevere; but does not ascribe any ill consequence to it.

## CASE XXI.

W. L. aged 42, corpulent, rather plethoric, of the nervous temperament, with a scrophulous diathesis. Gout hereditary, and first at 34. Has altogether taken twelve bottles of the medicine (procured from *Befort*) without any discoverable effect either of benefit or injury; although in one attack he took two bottles, divided into four doses, with an interval of a few days only between each dose. In all this gentleman's attacks, the gout has assumed chiefly the indolent chronic character.

## CASE XXII.

G. K. aged 55, thin and delicate, of the nervous temperament. Gout hereditary, and first at 28. A butcher; two years ago, having an attack in both feet, took a bottle at twice. The first dose stupified him. Awoke in a strong perspiration after seven hours' sleep. It had not any sensible effect on the stomach and bowels. It afforded great ease. He took the remainder of the bottle on the succeeding night. Appeared to the by-standers to be stupid and convulsed. So much mended on the following morning, that he stood in his shop, and, it being warm and settled weather in autumn, rode out in a cart. Suffered a severe relapse in the ankles, instep, and toes of each foot, and both knees. Repeated another bottle with similar immediate effects, but was left very weak and low. Gout returned, in the hand, within two months. Again took the medicine with similar inconvenient action on the nervous system, but with less controul over the symptoms. Reproaches the medicine with hav-

ing produced such weakness in the back and lower limbs, that, ever since, he has been under the necessity of using a pair of crutches.

### CASE XXIII.

B. R. aged 41, corpulent, plethoric, of nervo-sanguineous temperament, and of very bilious diathesis. Gout hereditary, and first at 28. In a severe attack, took half a bottle at bed-time, without any immediate effect; the remainder in the morning. Violent cholera ensued, with much perspiration. The symptoms quickly removed. No remote ill consequence on that occasion. In the next fit took two or three bottles, in divided doses, within a few days, but without much relief. On the following attack, still believing in the powers of the medicine to give ease, took four bottles in the course of eight days. It did not at all mitigate the symptoms, and the following distressing results were produced. The bowels were left very inactive. He was afflicted with hypochondriasis. The limbs were extremely weak and œdematous, and even ascites took place in a considerable degree. The muscles of the whole arm were remarkably relaxed, and of the thumb in an extraordinary degree. Indeed, in this gentleman's case, the indulgence in this medicine brought with it such dangerous symptoms, that he considers himself as having narrowly escaped from death\*.

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\* I could add very largely to this list of examples; but as the material point in question appears to be sufficiently illustrated, I am unwilling to allot more space for this purpose.



Sir Everàrd Home, in describing the power of the eau medicinale, mentions that he has ascertained it more than six times by experiment on himself, in the paroxysm of gout; and this fact, alone, appears to me to point out that the medicine does not possess more than palliative power, even when it acts most favourably; and cannot have the least claim to be called “a specific remedy for the cure of gout.” How much evil it tends to produce in the constitution, I think, is sufficiently exemplified in the foregoing cases.

In apology for the diffuseness with which I am discussing this part of the subject, I wish it to be remembered that the practice in gout at the present day, in this country, lies between the empirical and the regular treatment; and therefore it is of the greatest importance that the present question should be exposed to all its bearings, and the truth be brought to light. Is the practitioner to advise the use of vinum colchici, Wilson’s tincture, Reynolds’ specific, or eau medicinale, upon the faith of their *specific* agency? or is he to treat his patient upon general principles, varied and adapted to each particular constitution; and suited to those accidental circumstances which alter every individual case, in some more or less material point? The investigation into the nature of the various gout nostrums, therefore, still remains an interesting and unresolved question.

With respect to the chemical part of the inquiry, we are confined within narrow limits; for, as is well known, the substances of the vegetable kingdom do not admit of satisfactory results in any attempt of ultimate analysis, when we have it in view to identify particular substances. From this cause, an easy and convenient cloak

is afforded for the purposes of empirical compounders of medicine\*.

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\* In order to compare the sensible properties of the eau medicinale, with the several medicines which have been supposed, as discoveries, to represent it, I instituted a series of experiments which I now subjoin, adding some particulars to my former report upon the subject.

In the examination of the following medicines, I used a very moderate temperature (not exceeding 120°) in bringing them to the consistence of syrup, leaving them finally to spontaneous concentration. After the first evaporation, I added distilled water to the mass, and re-evaporated; performing this process twice, so as to prevent any fallacious inferences which might arise from the difference of menstrua in the several preparations. The following were the results, the wording of which I have a little varied from my former statement; having conferred with an ingenious chemist on the best comparisons of the sensible properties of the medicines.

EXP. 1. *Eau Medicinale*.—(The menstruum, apparently, a French wine); colour, similar to the extract of gentian; smell, very similar to it, inclining to the treacle lozenge; in taste, has some of the bitter of gentian, and slightly the flavour of opium; soon deliquesces after being dried.

EXP. 2. *Mixture of Wine of White Hellebore, and Vinous Tincture of Opium*.—Colour similar to the Eau Medicinale; smells slightly, and tastes strongly of opium; deliquescent.

EXP. 3. *Tincture of Colchicum*.—Colour, light brown; smell, rather similar to that of gum guaiacum; taste, slightly but distinctly bitter, and entirely different from that of the Eau Medicinale; deliquescent.

EXP. 4. *Wine of Colchicum*.—Colour, deep orange; deliquescent.

EXP. 5. *Acetic Preparation of Colchicum*.—Colour, pale lemon; deliquescent.

*The Peruvian Bark* has been recommended very strongly by Dr. Tavares, a Portuguese physician, as pos-

EXP. 6. *A very concentrated water decoction of Colchicum.*—Colour, bright yellow brown; only partially deliquescent, and so gummy, as to crack like dried mucilage of gum arabic. All these preparations of Colchicum, after the treatment described, resemble each other in smell and taste.

EXP. 7. *Tincture of Hedge-hyssop.*—Colour, almost black; no distinct comparable smell; taste, very bitter, like Taraxacum; dried and exposed in a damp apartment, very slowly and scarcely deliquesces.

EXP. 8. *Wilson's Tincture.*—(The menstruum, apparently, diluted spirit); colour, pale brown; smell, resembling that of extract of gentian mixed with orange peel and an aromatic; taste, similar to what is afforded by the substances just mentioned mixed together; deliquescent.

EXP. 9. *Reynolds' Specific.*—(The menstruum, evidently, rum); colour, blood-red, resembling compound spirit of lavender evaporated; smell, slightly similar to benzoic acid; taste, at first sweet, but afterwards imparts to the tongue a slight taste like that of benzoic acid; deliquescent.

In order to compare the quantities of solid residuum to be procured from the different preparations; and the relative solvent power of the menstrua for colchicum; one hundred grains of the following substances were inspissated by a gentle heat, brought to the same state of consistence, and then accurately weighed:

	Grains.
EXP. 1.—100 grains of Eau Medicinale yielded.....	5 $\frac{3}{4}$
2. ————— Wilson's Tincture.....	11
3. ————— Reynolds' Specific.....	9
4. ————— Spirituous Tincture of Colchicum	2
5. ————— Acetic Preparation of Colchicum	1 $\frac{1}{4}$
6. ————— Wine of Colchicum (so called, } from Fisher's, as directed by } Sir Everard Home).....	8



sessing the power of cutting short the paroxysm, and rendering its returns less frequent. He quotes further

		Grains.
EXP. 7.—	100 grains of the pure wine itself before distillation .....	$4\frac{6}{10}$
8. ———	The liquor obtained from the wine, the spirit being drawn off by distillation.....	$6\frac{3}{10}$
9. ———	A watery decoction, concentrated to the same strength as Sir Ev. Home's preparation .....	$9\frac{1}{7}$

Hence it appears from the preceding experiments, that if conclusions were to be drawn from the sensible properties of the different medicines, we should say that the quack preparations are unlike each other, and also different from any preparation of colchicum ; but when we again reflect, that active substances may be entirely disguised by admixture with those which are inert, we cannot form any positive inference upon such grounds, and a more solid basis seems to present itself for the determination of the question, in estimating the agency of the several remedies on the human subject. In the medicines Exp. 2. and 3, it seems probable that extraneous matter is added for the purpose of disguise ; for the eau médicinale, although yielding less residuum, is much the most active substance. In regard to the preparations of colchicum, the watery decoction contains the largest proportion of solid matter, but, I must observe, that it is a turbid mixture, and contains much mucilage. In the vinous preparation, Exp. 6, when the residuum of the liquor itself is deducted, rather less is to be referred to the solvent action of the menstruum, than in Exp. 4, but more than in Exp. 5. The spirit (alcohol) therefore may be considered to dissolve most of the principles of the colchicum. I have reason to believe that the acetic acid dissolves all the active principles of the colchicum. I formerly stated that 100 grains of acetum colchici yielded only  $\frac{3}{4}$  gr. of extract, but I find that as a mean of different experiments  $1\frac{1}{4}$  gr. may be stated as the quantity.

in its favour the authority of Dr. Held. He expresses his remarkable praise of the remedy, in the following words: “*Uno verbo, cortex peruvianus in podagra divinum est remedium\*.*”

Dr. Small also, in the paper already quoted†, offers a favourable testimony of the effects of bark, freely administered in the intermissions of pain and fever, and when the local inflammation has abated.

I have not hitherto been induced to make trial of this medicine in a paroxysm of gout; both from the satisfactory success of other treatment, and from an unfavourable idea which I entertain of the propriety of bark, in the circumstances under which this disease occurs.

Some patients inform me that they have made trial of the cinchona (*cordifolia*) in ample doses, as soon as the

It will necessarily vary at different times, according to the genuine qualities of the root; or, in other words, according to the proportion of its soluble material upon which the menstruum can act.

The acetic acid, as in the example of the black drop, and still more in the acetate of morphia, appears to effect a useful modification in the medicinal properties of many substances of the vegetable kingdom. I must again remark, that it is from accurate practical observations, we are to form our conclusions as to the nature and comparative strength of these medicines. I have already delivered my general opinion. In order to a further acquaintance with the subject, I made a series of experiments in the administration of the different substances to the dog. Of the general results of these experiments, and which I related in detail in my last edition, I shall offer the abstract at the conclusion of this Treatise.

\* *Observationes et Epicrisis de Corticis Peruviani solutari et proficuo usu in Podagra.*

† *Medical Observations and Inquiries*, vol. vi.

fever of the paroxysm has subsided; but it was not attended with good effects; and in a few instances, it very much disagreed. Guilbert and Hallé appear to think favourably of the use of bark in gout, administered on the same principles as in treating an intermittent; with great freedom in the remission of the symptoms: but they candidly observe, that they do not consider the propriety of the practice as yet sufficiently established. M. Guilbert, when speaking of this remedy, gives a fresh proof of his caution with respect to purgative treatment; suggesting that some bitter should be combined with the bark, to prevent its action on the bowels.

In the state of convalescence from the paroxysm, I often prescribe, with great advantage for the relief of debility, a draught composed of carbonate of potash, and decoction of bark with tincture of orange peel, or compound tincture of bark, and syrup of orange peel, to be taken in effervescence with lemon juice; giving in conjunction with it a colchicum pill, once or twice a day, provided that gouty action remains in any degree troublesome or threatening; and, as a cardinal point of treatment, paying the utmost attention to the regulation of the bowels. The use of bark in this manner is quite distinct from administering it in substance, during the paroxysm, and upon the idea of its specific agency.

*Sudorifics.*—Medicines of this class, as tending to debilitate the stomach, should be given with some caution. Antimony, in small doses, and conjoined with opium, in order to lessen the stimulating action of that medicine; and also with calomel, when it is used as a purgative, or as an alterative; is an important remedy, and has always appeared to me very useful. I consider



however, that the skin should not be made a free channel of evacuation, either for the removal of the fulness of the habit, or for the diminution of the local inflammation. When the treatment is such as to relax the skin very powerfully, an obvious disadvantage follows; namely, that of an increased susceptibility in the surface of the body to changes of the atmosphere, at the period of convalescence; and the consequent danger of relapse. A hot and dry skin will be much relieved by free sponging with tepid vinegar and water; by cool drink; and by a well-ventilated apartment, kept at a moderate temperature. All sources of stimulus to the circulation being avoided, the heat of skin soon yields to the action of purgative, diuretic, and sedative medicines.

*Narcotics.*—Opium, under proper management, is a remedy no less advantageous than powerful for the relief of the most distressing of all the symptoms, *the pain* of the disease.

Although Sydenham, upon the humoral principles of practice, considered the pain to be “the disagreeable remedy of Nature,” and “a security to the patient’s life,” yet he permitted, in the event of violent pain, a dose of laudanum to be given in the evening.

Warner expatiates warmly on the comforts which laudanum afforded him. He employed, with great propriety, a watery solution\* of opium; and occasionally also an anodyne elixir, the formula† of which is complicated, and constitutes too heating a preparation. The good effects which opium is capable of affording, are de-

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\* A full and plain Account of the Gout, p. 166.

† *Ibid.* 164.

pendant on the manner of its use, both as to the preparation and dose, as well as other points which I shall mention: accordingly as it is administered, it may either aggravate or relieve the severity of the sufferings. M. Guilbert entertains the sentiments of Sydenham, and, in general terms, advises patience rather than any active medicine: but admits that *Dover's powder* has sometimes proved very serviceable.

Dr. Cullen observes,\* “The opiates give the most certain relief from pain; yet, when given in the beginning of gouty paroxysms, they occasion them to return with greater violence.”

As a rule of practice, always requiring careful consideration, any excessive state of inflammatory diathesis, and a constipated state of bowels, should be removed previously to the administration of opium.

With respect, however, to the first part of the statement, we have to estimate the distinct effects of the stimulus of pain on the action of the heart and arteries as well as upon the vessels of the affected part. Sir Everard Home, in an interesting paper†, “On the Influence of the Nerves upon the action of the Arteries,” has related several experiments which very well support my present conclusion; namely, that in any inflammation dependant on local and general irritation of the nerves, our rules of treatment must often be varied from that which is observed in the primary excessive action of the vessels in *common* inflammation, by which the nerves become affected in a secondary manner. On many occasions, in the gouty paroxysm, when the patient has described the

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\* First Lines, part 570.

† Phil. Trans. 1814, part ii.

pulsatory throbbing of the inflamed part, to resemble almost the successive blows of a hammer; when the heart had an inordinate action; and when the inflammatory diathesis has appeared altogether urgent, I have stood by the bed-side and witnessed the happy power of a free administration of opium, in causing an abatement of the action of the vessels, and producing universal tranquillity in a short time\*. Nevertheless, under the circumstances which I have just stated, we must employ united means; and although the use of general bleeding may be dispensed with on most occasions of this kind, we must avail ourselves of other modes of relaxant practice, in addition to the sedative influence of opium. In this intention is comprehended the action of purgative and diuretic medicine†, and the procuring of a cool and soft state of the skin.

In an ordinary state of the bowels, and when pain is urgent, the full action of a purgative is not essential as a preliminary; and under these circumstances, I have met with success in the exhibition of the draught, p. 198, at regular intervals, conjointly with the opiate at bed-time, in adequate doses; so that, by the united effect of each remedy, relief has been obtained without delay—the influence of the mercurial purgative being added or not,

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\* The effects of opium in the agonizing pain of tooth-ache, when that severe affection of nerve produces high sympathetic fever, also illustrate the present point of pathology.

† I have often found that opium, and especially the black drop, has itself acted as a diuretic. I may add, as a general position, that it has had this effect only with patients of the nervous temperament; or, with those whose nervous system has been in a state of morbid sensibility. More commonly it restrains the action of the kidneys.



as the particular symptoms have required. Under this treatment, comprising a due action on the bowels and kidneys, I have not found the observation of Dr. Cullen, just now quoted, to be confirmed; but I have several times experienced, that if I have trusted to the purgative, or the opiate, singly, a re-action of the circulation and violent return of pain have taken place at night.

In reference to the method of employing the remedy now under consideration, I shall quote the following excellent remark of Dr. Sutton:—"In the use of this medicine, also, it must be observed, that the benefit is not connected with a small dose of opium; but the quantity is defined by its producing a complete cessation of pain\*."

I have myself found the use of this medicine remarkably successful in its crude state, and when joined with antimonial powder, or, what I consider to be preferable, Dr. James's powder. The patient being furnished with twelve pills, each containing one grain of *crude* opium and half a grain of James's powder, he may be desired to take one, two, or, if pain be very severe, even three, at bed-time, as the first dose, and repeat one every hour or two afterwards according to the degree of pain; this being the only regulation as to the quantity to be employed, when there are no contra-indications.

It is worthy of consideration, that so powerfully does pain modify the influence of opium on the nervous system, in every kind of disease, that it may be given in the boldest doses, without hazard or any ill effects, when pain is very intense†; and in no other way than by the

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\* Tracts, &c. p. 216.

† Lately a striking example of this fact occurred to me. A young woman of delicate constitution, suffered severe torture

active repetition of such doses, can it be really efficacious, when the occasions for its employment are urgent.

It is a pleasing medical reflection that severe diseases admit of the most free employment of appropriate remedies, without serious injury to the constitution. To what an extent may not the treatment of bleeding be carried in dangerous inflammation, and yet, in how short a time does the strength of the patient return! How large are the doses in which bark is employed without inconvenience to the stomach, in the cure of an intermittent! and further, what frightful quantities of mercury may be employed under particular circumstances, without lasting mischief! the disease, in all these cases, as it were, absorbing the remedy.

Returning to the subject of opium, with which I began the illustration of my present position, I may remark that it had long been a desideratum that this medicine should be rendered as free as possible from its

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from some branches of the fifth pair of nerves supplying the cheek; the pain being of equal intensity with that of the *tic douloureux*. Even delirium ensued. Three grains of crude opium, and one grain of James's powder, were administered at the first dose; and of pills, containing a grain of opium and half a grain of James's powder, one or two were desired to be repeated every hour, until pain should be overcome. Twelve grains of opium were thus taken in twelve hours; the pain was removed, and not the least inconvenience was experienced. A fortnight after, a little pain threatening the return of former suffering, she had recourse to one pill; but this now very sensibly disagreed, and caused sickness, and confusion and uneasiness of the head. Abundant proofs of the truth of the position in question I might state, both from my own experience, and on the authority of authors.



stimulating and heating qualities, which prove always more or less unfavourable to its anodyne effects, and often forbid its employment, even when pain demands its use. The Lancastrian or *black drop*, which is a concentrated preparation of opium procured by means of boiling and digestion in a vegetable acid\*, is found to agree with

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\* Dr. Armstrong, in his late valuable publication on "Typhus, and other Febrile Diseases," gives the following account of this medicine: "The black drop was originally prepared, upwards of a hundred years ago, by Edward Tonstall, a medical practitioner of Bishop's Auckland, in the county of Durham, and one of the Society of Friends. The recipe, passing into the possession of a near relative, John Walton of Shildon, who also prepared that medicine, was found amongst the papers of his brother, the late Edward Walton of Sunderland, and by the permission of my much respected friend Thomas Richardson, senior, of Bishop's Wearmouth, one of his executors, it is here inserted.

"Take half a pound of opium sliced;—three pints of good verjuice;—one and half ounce of nutmegs;—half an ounce of saffron. Boil them to a proper thickness, then add a quarter of a pound of sugar, and two spoonfuls of yeast. Set the whole in a warm place near the fire for six or eight weeks, then place it in the open air, until it become a syrup: lastly, decant, filter, and bottle it up, adding a little sugar to each bottle."

Dr. Armstrong quotes the authority of a friend, in estimating the strength of this preparation, to be as one to three, compared with the ordinary tincture of opium. He considers from his experience that this view is just. I was formerly of the same opinion; but my later and more careful trials have led me to conclude, that the difference is rather more than as 1 to 2, but not so much as 1 to 3.



many individuals much better than any of the usual forms in which it is prepared; and of this fact I have had many convincing proofs. The chief advantage which it has appeared to possess, has been in much less disturbing the stomach during its immediate operation, and the head on the following day, than either the tincture or wine of opium prepared according to the Pharmacopœia. It is perhaps imagined that the vegetable acid does not dissolve the resin of the opium, which appears to be the most heating of its component parts, but this is not a correct opinion; and although the black drop, both from its menstruum, and from the palatable ingredients mixed with it, proves rather grateful to the stomach, I must consider it a heating preparation. The resin of opium, apparently from the influence of extractive matter united with it in crude opium, is in a considerable degree soluble even in water. M. Orfila quotes some experiments\*, to shew that the watery extract of opium is of all its preparations the most active; but that each of its component parts possesses more or less of an anodyne power; and of the unessential principles (if I may be allowed this expression), the resin, the most. He adds, that the resinous part, although separately and freely administered, does not inflame the mucous membrane of the stomach†. Mr. Battley, the chemist in Cripplegate, whose useful labours in preparing and preserving all vegetable medicines in their most pure and active state, merit the thanks of the profession, appears to have succeeded in forming a preparation of opium more perfectly sedative than any

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\* *Traité des Poisons*, partie iii. p. 144.

† I have made some experiments with opium, on the dog, which I shall state at the conclusion of this Treatise.

which we have before possessed. He states that he has entirely separated the resin and the salt, by methods of decomposition which he promises to make known, when he has confirmed his several opinions respecting opium, fully to his satisfaction. I have made trial of the fluid preparation, to which he gives the name of liquor opii sedativus, and must in justice declare, that it has, in many instances, produced very satisfactorily all the effects of an anodyne\* and a sedative; namely, in relieving pain, and procuring tranquillity and sleep, with less subsequent inconvenience to the nervous system, the skin, and the action of the bowels and kidneys, than from any other form of opium which I have used with equal freedom. A gentleman, suffering from rheumatism affecting the fascia of the thigh, and still more from extreme nervous restlessness, so that without the aid of a narcotic, sleep was entirely absent from his eyes, took, in comparative trials, the black drop and the liquor opii sedativus. His preference was decidedly given to the latter medicine, which calmed his nerves and left him free from inconvenience on the following day. On the contrary, the black drop, although agreeing well with the stomach, produced heat of skin; and on rising in the morning, he was unrefreshed, and felt as if he had been too much excited. I could add much further satisfactory evidence to the value of this preparation, if I thought further statement required. In one most urgent case of pain from gout, attended also with excessive nervous irritation, I found it necessary to give in divided doses one hundred drops of

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\* By the term anodyne, I speak of a medicine relieving pain; by sedative, of a medicine more particularly allaying simple nervous irritation.



the liquor opii sedativus, in the course of three or four hours; and this, for two or three nights in succession. No inconvenience followed, and the patient was much satisfied with its superiority over other preparations of opium, which had been variously tried. In this case, I may add, the extract of stramonium (from the seeds) had also been given in free doses without success. So far as I have judged of the relative strength of this medicine, I should direct it in similar doses with the tincture of opium of the Pharmacopœia; and I wish to repeat that it may be much more relied upon as a sedative. In extreme pain, however, opium in any form deserves our full confidence; and should the symptoms be of intense severity, it will usually be desirable to choose it in the liquid state, on account of its more immediate power of acting\*; but under the most ordinary circumstances which occur, I derive more satisfaction from the administration

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\* I was called in haste to a lady, suffering torture from the state of the gall duct obstructed by a biliary calculus. I never witnessed greater signs of agony. The features were distorted; she hallooed with exclamations for relief; the pulse was scarcely to be distinguished; the extremities were quite cold; the whole appearance of the patient was frightful. All the alarming symptoms of the case were overcome by opium. I gave instantly 100 drops of the tincture in hot brandy and water, and repeated doses of 30 drops every quarter of an hour until its due action was evidently established: 190 drops were necessary to the desired effect. The first dose seemed of no avail. In one hour sleep took place, and pain never returned in any degree. The hot bath was used in conjunction with opium; and purgative medicines were freely administered, when the dreadful paroxysm of pain was ended.



of crude opium joined with a small dose of James's powder, for the relief of pain, than from any of the fluid preparations which I have employed. The small addition of the antimony materially serves to prevent the opium from restraining the action of the bowels, as I have found in comparative trials with the same patient; and certainly it also improves the sedative operation of that medicine. The pulvis ipecacuanhæ compos. is also an excellent form of opiate; and, when joined with the use of saline medicine, sometimes proves more useful than any other preparation. I have found small and repeated doses, much to be preferred to the larger at more distant intervals. When relief from weariness, restlessness, and uneasy feelings, rather than pain, demand the use of sedative medicine, we may choose between the liquor opii sedativus, and the next class of narcotics presently to be mentioned; or, if feverish action be present, and the symptoms first stated are merely sympathetic, we shall often be more successful with the conjoined use of saline and antimonial medicine, and aperients, than with any species of narcotic. In concluding the subject of opium, I shall take a brief notice of its insulated principle, morphium, stated to be the most active constituent of opium, and not very long since announced\* by M. Sertürner. I have made trial, in several instances, of the combination of this principle with the acetic acid, which has received the name of acetate of morphium. It was prepared from morphium by Mr. Garden of Oxford-street, procured agreeably to the formula† of

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\* See Thomson's Annals of Philosophy, No. liv.

† This is stated in Annals of Philosophy, June 1820.

Dr. Thomson, and found to be much superior to the previous method of Sertürner. In the cases in question, I was driven to the necessity of choosing a new narcotic, for all the ordinary forms of opium had ceased to relieve; and the sufferings of the patients were intense. I had the satisfaction to find this new medicine agree remarkably well; and it proved highly anodyne. I have prescribed it in doses of one or two grains every two, three, or four hours, till the purpose has been answered. I have directed a saline draught with the addition of camphor julep, as the vehicle of the acetate of morphia. It is unquestionably the least exciting preparation of opium which can be administered; and if a small dose of the hydrocyanic acid be added to the draught, its sedative powers become more remarkable.

Notwithstanding, however, these stated improvements in the mode of administering opium, there are some instances of particular idiosyncrasy of constitution, in which this medicine cannot be borne in any form. So repugnant is the nervous system to its influence in these cases, that, sometimes, even a moderate dose of the syrup of the white poppy produces a state of temporary delirium. This I have witnessed on two occasions; and in less aggravated examples of disagreement, the smallest portion of opium confuses the head, and deranges the stomach in a distressing degree. The exceptions to the advantages of employing opium, when pain, not depending on *common* inflammation, is urgent, fortunately do not often occur; but with such persons as do experience from it, in any dose or form, an increase of nervous irritation, so that even the relief from pain is an advantage too dearly purchased, it is incumbent on us to make trial of other narcotics; respecting which, I shall give a brief account.



The extractum hyoscyami, as a sedative and weak anodyne, is entitled to some reliance; but it has appeared to me to vary in its effects, more remarkably than any other in this class of medicines. Thus, with some individuals; three or four grains twice in the day, prove a quantity as much as can be taken without disagreement; while, in other instances, a drachm in the twenty-four hours has been given without inconvenience: but when the system is not soon sensible to the influence either of this medicine, or of *conium*, which I should place in the same scale of power as a sedative, it follows, according to my experience, that a perseverance in the dose is quite useless, and tends only to weaken the stomach. The very opposite degree of effects produced by all vegetable medicines, does, in many instances, unquestionably depend in a great measure on their different mode and state of preparation, and consequent virtue\*; but with respect to

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\* It not only happens that the extracts of the vegetable substances are sometimes ill prepared in the first instance, but also that they undergo decomposition from long keeping, and particularly if in a damp situation. In order to have a vegetable medicine most active in its properties, the first step is to collect the plant in its best state of vigour; the next is the drying it by a proper heat; and the last, to reduce it to powder, and put it up for use in a closely stopped bottle, covered with dark paper to secure it from the influence of light; according to the method which the College directs. In this statement, however, I admit, that an extract well prepared, and carefully preserved, is also fully entitled to our confidence.

M. Orfila observes (Waller's Translation, vol. ii. p. 50), with regard to the medicinal power of vegetable substances, "1st. That certain extracts prepared by expressing the juice of fresh plants, and evaporating them in a water-bath, are incomparably more active than those obtained by any other process. 2nd. That they are of a yellowish colour, which forms a singular



the statement just given of henbane, I have made reference to cases, in which the same extract was employed.

The humulus lupulus was strongly recommended by the late Mr. Freake, as a remedy in the paroxysm of gout; but from very sufficient trials which I have made of this medicine, I can assert, that it is quite undeserving of dependance. It is in any case a very weak sedative. This opinion is also supported by the experiments of Dr. Bigsby\*.

The soporific medicine prepared from the inspissated white juice of the lactuca sativa, or common garden lettuce, introduced to our notice by Mr. Duncan, sen. is well entitled to good report; and I am happy in this opportunity of bearing testimony to its virtues. The milk exuding from the plant when wounded, evaporated to the consistence of extract, to which the Professor has given the name of *lactucarium*; is the preparation of which I have made trial; and from my experience of its effects, upon a very extensive scale, in miscellaneous cases, I can much recommend it as a mild sedative, calculated to tranquillize without stimulating; to allay a

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contrast with the black colour of those found in commerce, which without doubt depends on the decomposition which these undergo by caloric. 3rd. That the extracts of those plants sold in the shops, differ greatly amongst themselves in regard to their action on the animal economy; that a great proportion of them possess no virtue; which circumstance, we are of opinion, ought to attract the attention of those Professors, whose duty it is to visit the shops." Vegetable extracts are now prepared in vacuo by Allen and Co., Plough Court. It remains for experience to determine whether the reduced temperature of which the chemist can thus avail himself, be more favourable to the preservation of the immediate principles, than the heat used in the water-bath, and in contact with the atmosphere.

\* See Medical Repository, vol. iv. p. 287.

cough ; and to promote sleep ; but, as an anodyne medicine to relieve pain, I find that I cannot place reliance upon it. For the purpose of procuring tranquillity and sleep, I usually direct four grains to be taken at bed time, and often join with it, one grain of James's powder. The dose may be repeated in two or three hours if required.

In comparing the efficacy of lactucarium with the *lactuca virosa*, I find the most decided preference to be due to the former medicine. This will be readily conceived, when it is considered that the lactucarium consists wholly of the milky juice inspissated ; and the *lactuca virosa* is derived from the expression of the whole plant. I consider it indeed a very valuable remedy under certain circumstances of nervous disturbance ; and its mild properties recommend it as an innocent medicine\*.

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\* Mr. Probart, of Great Portland Street, by my recommendation, made an extensive plantation of lettuces for the purpose of preparing lactucarium, which he keeps in great perfection. The milk was collected by means of cotton, and inspissated merely by the action of warm air ; lest by any other mode of applying heat, the delicacy of its properties should be injured. He found the plant to afford most of the milky juice when in seed. It scarcely contains any portion in the early state in which it is brought to table. Being desirous to form an extract from the lettuce which should prove efficacious if used in larger doses than the lactucarium ; be less expensive, and therefore more accessible for general use ; he made some experiments, the result of which I shall state in his own words.

“ When the plants are cut down, the milky juice for the most part assumes a concrete form, and is concentrated chiefly in the rind and in the old leaves, such as are about changing to a yellowish colour. These parts, therefore, I select for my ex-



The use of the *datura stramonium*, or thorn-apple, prepared and formed into an extract from the seeds of the plant\*, has lately been revived to the attention of the profession, and much recommended as an active anodyne by the late Dr. Marcet†; whose loss to science and the world must be universally lamented. I have, on several occasions, made trial of this extract, in free doses, in the severe pain of gout; but certainly with a most inferior

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tract, rejecting the substance of the stalk and the young sprouts; and having macerated them for twenty-four hours in water, I boil them for two hours; and, without pressure, allow the clear decoction to drain through a sieve. I then evaporate it as far as it can be done with safety, and finish the process in a number of shallow dishes for the purpose, in the air."

From the success which attended the use of this extract, in the case of a gentleman who suffered severely from an irritable state of bladder, I have reason to think that it may prove an useful medicine. In the case to which I allude, the symptoms were extremely urgent, and the dose employed was ten grains three times a day. I must add, that various other sedatives had been tried with much less relief than was afforded by this extract.

The milky juice itself may be collected by every Practitioner living in the country; and the requisite care being employed in the inspissation, the medicine may readily be brought into general use.

\* Mr. Battley informs me, that in his opinion the far more active properties of *stramonium* reside in the *rete mucosum* of the capsule.

† See a paper on the subject, *Medico-Chirurgical Transactions*, vol. vii.; to which, for further particulars of the properties of this medicine, I refer the reader.



effect to that obtained from opium employed in the manner I have described : and now on every occasion of prescribing for the relief of severe pain in gout, I almost confine myself to the use of crude opium, in union with James's powder. But, to return again to those cases of exception, in which opium is inadmissible from the idiosyncrasy of the patient, I must very conclusively give the preference to the stramonium over all the other narcotics which I have tried. It has most succeeded in relieving that kind of pain which is dependant upon, or immediately connected with, spasm of the muscular fibre ; and, given at bed-time, it is well calculated to counteract the tendency to cramps. I have never found it necessary to commence the dose in a smaller quantity than a fourth of a grain twice a day ; and, as to the maximum, I should say, that when used to the extent of ten grains in the twenty-four hours, in divided doses (of course gradually brought to this amount), if it do not produce decided advantage, its use should be entirely relinquished. In conclusion of the subject, I think it important to add, that I have obtained more decided advantage from employing the stramonium extract and lactucarium, in conjunction, than from the former separately ; and in reflecting upon my experience with these medicines, I am led to affirm, that the former acts most as an anodyne, the latter as a sedative ; and that where both effects are desired, they will be most favourably procured from the union of the two preparations. Some gouty patients who experience much inconvenience from the use of opium, derive the happiest effects from this combination, and find it competent to relieve even severe pain.

The *atropa belladonna*, or deadly night-shade, is a narcotic of well known activity, and in cases of pain and spasm, which have resisted other anodyne and sedative

preparations, it is eminently entitled to trial. It is worthy of observation, that all the narcotic vegetables have their own peculiar mode of acting, and which may be called *specific*. Hence the propriety of change when any one narcotic disappoints our expectations. In hoop-cough, and in some cases of spasmodic asthma, I have been much satisfied with the effects of belladonna; but in the gout, having succeeded in soothing pain and irritation by other narcotics, I have never yet been induced to employ it.

The aconitum napellus, or wolf's bane, is quoted by Barthez (tom. i. p. 152), as efficacious in relieving the chronic pains of gout. From such little experience as I have had with this medicine, I am not disposed to give it confidence.

That I may not be misconceived in my opinion of the value of the narcotic class of medicines, in relieving the symptoms of pain and irritation which the gout produces; I must, in conclusion, state, that in the great importance which I do attach to them, I view them still as subordinate to the more radical means of treatment; as auxiliary only to the primary objects, of removing inflammatory action; of rectifying all the secreting functions; and adjusting the circulating system to a healthy balance.

*Diet.*—It is in this important particular, most generally, that the greatest errors are committed by the gouty patient. This fault is sometimes founded on his own love of habitual indulgence; but it is also connected with the false doctrines which he has imbibed concerning the disease, and with mistaken notions of the prevalence of debility.



The avoiding of every circumstance with regard to food, both in respect to its quantity and quality, which can produce hurtful excitement; and still more especially the shunning, or very cautious employment of wine or any spirituous stimulant, are obviously considerations of the utmost importance. Not only, are the symptoms of the paroxysm materially aggravated and prolonged by errors of this nature; but the additional evil of erysipelas sometimes arises as a consequence, and takes place either in conjunction with the gout, or as an immediate sequel to it. Of this result I have seen some very striking examples. Under very acute symptoms, the nourishment should be wholly fluid, and not stimulating. Well made broths are usually admissible. Boiled bread and milk is much to be recommended, and in most instances agrees perfectly well. A debilitated stomach, with weak constitutional powers, may sometimes require a diet rather cordial and supporting, even in the paroxysm; but this matter should be managed with much discretion. We should be careful not to support the disease, at the same time that we assist the powers of the patient; and on this principle, any stimulating article in the nourishment, should be subservient chiefly to the curative employment of medicines.

On the few occasions which authorise the use of wine in the paroxysm, it should, as a general rule, be given in dilution; and its cordial powers are, in general, most usefully obtained when mixed with some article of nourishment, such as, arrow root, sago, or gruel. These nourishments, or panada agreeably spiced, will often alone prove sufficiently cordial during the urgent symptoms, although much languor and depression do prevail.



It is incumbent on me here to mention, that I have met with instances of peculiarity of nervous temperament, causing such great depression, that even during the height of the painful symptoms, a little animal food and two or three glasses of madeira undiluted, have been really necessary in the daily plan of diet. Such material support will, however, seldom be proper, until the convalescent stage is fairly commenced; and the exceptions to the general rule of directing slight and cautious nourishment, are of rare occurrence.

As a diluent beverage, rennet-whey is equally agreeable and useful. Sometimes the thirst of the patient is so urgent, that he desires the coldest drink, and solicits even that the water should be iced. I have not opposed an inclination thus dictated by disease; nor have I seen any harm produced by the occasional use of such a refreshing indulgence. Yet the action of the medicines on the bowels and kidneys must be aided by frequent draughts of warm diluting fluid, as tea, thin gruel, or barley-water; or very warm water alone. Acidulated drink is usually unfriendly to the gouty stomach, and especially during the paroxysm; but I have met with some instances, in which even at that time the free use of lemonade has perfectly agreed. I need hardly mention, that, during the action of the mercurial purgative, acid matter should be avoided in every shape; and the warm fluids already mentioned ought alone to be in free use.

With the exception just expressed, the subacid fruits in season, as oranges, and grapes of a good quality, and apples roasted, may be included in the proper gratifications of the palate; provided they be used with moderation; and that they perfectly agree with the patient's stomach.

*Bodily Exertion.*—Sydenham advised that the patient should take daily exercise in a carriage, even in the beginning of a fit, except when in excessive pain. Such a degree of resolution as this would require, is not easily practised, nor can I assent to its propriety. It would indeed be incompatible with the attentive treatment suggested in these pages. The opposite extreme, however, of the entire quiescence and relaxing influence of the bed, continued for a longer period than is really necessary, is to be equally opposed. Practice affords us abundant proofs, in how great a degree a stiffness and debility of the limbs may be counteracted by moderate and early efforts of exercise.

Van Swieten relates\* with pleasantry the story of the dancing-master, whose large family did not allow him to be long idle in nursing his gout.

Some few, on being threatened with an attack, have removed the symptoms by the spirited exertion of a long walk; but it is a doubtful experiment, and is much more commonly followed by serious disadvantage.

Dr. Small walked abroad as soon as the inflammatory action had ceased; and expresses his opinion, “that nine in ten of gouty cripples owes their lameness more to indolence and fear of pain, than to the genuine effects of the gout†.”

In cases of great suffering, and of neglected treatment; and when the patient has, for a long continued period, been entirely confined to the bed, or by choice indulges in it; it is probable that the excessive secretion of mucus in the urinary bladder (already described as

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\* Commentaries, § 1261.

† Med. Obs. and Inqu. vi. p. 200.



accompanying the irritating quality of urine of high specific gravity) may indirectly, by its cementing quality, assist in the formation of calculous concretion; and thus lead to the double tortures of the stone and the gout.

This statement, I wish however to be understood, belongs exclusively to the greatest mismanagement of the case; and to the consequent occupation of the bed for weeks and months.

Except under extreme circumstances, it may be said, the patient should every morning leave the bed for the couch or the chair, having his legs raised and supported in the most easy position; and, in proportion as pain and inflammation abate, should gradually employ such further exertion, as relieves rather than produces irritation. But I must add, that, in a severe paroxysm, and during the height of the symptoms, the patient is of necessity confined to his bed in the most helpless state; and, in this case, so far from using any forcible attempts to move the affected limbs, thereby producing great increase of pain and irritation, I advise that they may be relieved and supported in the most studied easy position, by means of small pillows placed so as to cause the greatest relaxation to the muscles. A further comfort is also afforded by the use of a cradle\*, applied so as to keep off entirely the weight and pressure of the bed-clothes; still using sufficient immediate covering to the limbs to produce comfortable warmth.

I have witnessed many instances in which the too early exertion of the limb, has, by the over-action of the

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\* This is easily constructed, by fastening with nails two or three segments of hoops, bent in a semi-circular form, to two parallel pieces of wood.



weakened parts, produced relapse. This part of the management of the last stage of the fit, often requires a very delicate exercise of medical judgment.

*The Passions.*—Many marvellous cases of the immediate cure of the paroxysm are related, by ancient authors, to have been effected by the sudden influence of the strong passions of the mind, and more particularly by *terror*. Dr. Falconer very justly observes, that these narratives “are rather matters of curiosity than utility, and what we can make no application of in practice\*.”

It should, indeed, be our care to allay rather than to excite any violent emotions, which are so much the prolific offspring of the disease itself. We cannot too freely introduce hope, cheerfulness, and tranquillity; and the attention should be agreeably diverted. Fortitude and true philosophy are more valuable aids to the welfare of the patient, than the superstitious charms of the ancients; in proportion as it is better to improve the reason, than to deceive the imagination and subvert the judgment.

## LOCAL TREATMENT IN THE PAROXYSM.

THE present consideration is truly a point of great importance, and offers in its details much useful opportunity of novelty. The inflammation of gout has never been treated upon fixed and regular principles. It has most commonly been left to its own injurious course, unchecked and unrelieved. By one kind of manage-

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\* Upon the Influence of the Passions on the Disorders of the Body.

ment, it has been nurtured, increased, and prolonged; by another treatment, it has with hazard been at once dispersed. Amidst such irregular proceeding, it becomes a valuable desideratum, to establish a settled mode of practice, which may at once be safe and useful. This view of my subject I shall now endeavour to offer, in a short notice of the chief topical remedies which are in use at the present day, or such at least as are not wholly discarded; and in describing the particular method of treatment which I am induced to recommend.

*Leeches.*—The immediate emptying of the vessels under inflammatory action, by means of leeches, may appear at first sight very consonant to the just doctrines of pathology; and the propriety of the practice has been advocated by authors in general. Some practitioners prefer the more prompt method of opening one of the distended veins by a lancet, expecting in this manner more effectual and speedy relief\*.

From an attentive experience of the effects of local bleeding, however performed, I am led to consider, not only that such treatment is unnecessary, but that it is in most instances injurious, and, even when apparently useful in relieving the immediate symptoms, is very seldom attended with permanent advantage.

It has always appeared to me to be a correct and sound principle of practice in local inflammations of every kind, that, whenever their violence is such as to influence the action of the heart and arteries to any considerable degree, the abstraction of blood should be made from the arm, rather than from the part affected; but that when

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\* The use of leeches, when pain and inflammation are violent, is much recommended by the French physicians.

the inflammatory action is almost entirely local, the depletion of the vessels should be local also. With regard to the inflammation of gout, however, we are to reflect, that it forms only a part of a constitutional disease, and that it is often of a more fugitive nature than any other kind of inflammation.

In a few instances after the application of leeches, I have seen that the inflammation has very suddenly transferred itself to the other limb; hence pointing out, that the constitutional causes were in active force, and not to be relieved by local loss of blood. I must allow that the use of leeches does sometimes afford considerable relief, in abating the inflammation, and I do not argue that it is injurious to the constitution; nor can it be liable to such an imputation: but I must add, that the indiscriminate use of leeches in gouty inflammation is by no means innocent in its local consequences. An increase of inflammatory irritation and pain now and then follows their application.

A gentleman having acute gout in the instep, applied two leeches to the inflamed surface. On the following morning the whole of the leg was swollen so as to be as large as the thigh, and the skin was red and shining. Evidently this was erysipelatous inflammation. The pain of the instep was not relieved.

A gentleman subject to occasional attacks of gout, met with an accident to the foot which required the use of leeches. Each application of them brought on gouty inflammation. In another case, the gouty inflammation, for the relief of which leeches were applied, became much aggravated by the application, although the discharge of blood from the orifices was with great difficulty stopped. I have also seen troublesome and lasting ulcers formed from the bites of the leeches.



Such then are the occasional inconveniences which are produced as an immediate consequence; but as a more serious, because more lasting, evil, I have often seen the debility of parts increased in this manner, and rendered very permanent; and when much blood has been removed, a troublesome œdema of long standing has followed, attended with a corresponding incapacity in the action of the nearest joints. As a further argument against the employment of leeches, I contend that they are wholly unnecessary as a local remedy for the removal of the inflammation, which is effected with much more advantage by the use of an evaporating lotion.

In three instances, I have witnessed the effect of taking blood from one of the distended veins near the foot, when violent gout was situated in the toe; and I was by no means satisfied with the result. An increase, rather than a diminution, of pain, was the consequence in two of the examples; and in the third, much local weakness seemed to be the result. The affected parts during the inflammation are in a state of such high irritation, that it is requisite to exercise great delicacy in the local remedy which is used, both as to its nature and the mode of application.

It has invariably happened within the range of my experience, that active constitutional treatment, as already detailed, together with the employment of local evaporation in the mode presently to be described, has entirely superseded the necessity of more doubtful and complicated means for the relief of the affected part.

*Vesicatories and Irritants.*—I have not sought for any experience in this class of remedies in acute gout, from the objection which I conceive to their most probable

agency ; and from my being satisfied with the efficacy of other means.

Cullen (Par. 565, 566) speaks of blisters as effectual, but hazardous ; and expresses the same opinion of *stinging with nettles*. The burning with *moxa* (the Chinese mode of cautery) must be considered as a species of painful blistering. Sir William Temple relates the cure which he received from it\*. Hippocrates employed the burning with raw flax in the neighbourhood of the affected joints. Of *ludicrous* applications, a copious list is furnished in the following amusing extract from the curious *τραγοποδαγρα* of Lucian, which I copy from M. Guilbert.

Terunt plantagines, et apia.....

Et folia lactucarum et sylvestrem portulacam.

Alii marrubium ; alii potamogeitonem ;

Alii urticas ferunt ; alii symphytum ;

Alii lentes afferunt ex palustribus lectas ;

Alii pastinacam coctam ; alii folia persicorum,

Hyosciamum, papaver, cepas agrestes, mali punici cortices,

Psyllium, thus, radicem ellebori, nitrum,

Fænum græcum cum vino, gyrinum, collamphacum,

Hyparissimam gallam, pollen hordeaceum,

Brassicæ decoctæ folia, gypsum ex garo,

Stercora montanæ capræ, humanum oletum,

Farinas fabarum, florem asii lapidis :

Coquunt rubetas, mares-araneos, lacertas, feles,

Ranas, hyænas, tragelaphos, vulpeculas.

Quale metallum non exploratum est mortalibus ?

Quis non succus ? Qualis non arborum lacryma ?

Animalium quorumvis ossa, nervi, pelles,

Adeps, sanguis, medulla, stercus, lac.

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\* See his Works, vol. iii.

Bibunt alii numero quaterno pharmacum :

Alii octono ; sed septeno plures.

Alius vero bibens hieram purgatur :

Alius incantamentis impostorum deluditur, etc.

*Warmth.*—The various contrivances of warm covering to the affected part, for the purpose of producing perspiration ; or in the fanciful language of humoral pathology, *to invite the deposition and discharge of the morbid matter*, although apparently full of prudence, and seemingly warranted by the custom of ages, do indeed belong to the worst part of the ancient practice. Combed wool, or socks and bootikins, have been favourite modes of fulfilling this plan of treatment\*. One gentleman, who gave ample trial to the use of bootikins, informs me, that his ankle joints have never recovered the excessive weakness which they occasioned. From several patients I have obtained the same information, of much permanent debility being produced by this treatment. Some have, in a more partial manner, applied silk oil-skin to the affected part, with relief to the inflammation by means of the perspiration produced, as in the effect of bootikins ; but which was not a sufficient compensation for the subsequent weakness to which it led. *Flannel and patience* still form the adage of many, whose caution is greater than their judgment. It is obvious that the confinement of morbid heat by the warm covering, on the one hand, must serve to increase pain, and prolong the disease ; or if, on the other hand, perspiration be much induced, the debility which is consequent on this mode of evaporation becomes a secondary evil of great magnitude. The most tedious and intractable cases which I have seen, have

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\* Gardiner on the Gout.



been those in which the relaxing practice has been carried to its fullest extent, both by local accumulation of warmth, and by the influence of oppressive covering of the bed, together with corresponding errors in the regimen throughout. Even in those occasional exceptions to the general course of the complaint, in which a fit of the gout has taken place, rather as a remedy than a disease, it is proper that only moderate warmth of covering should be employed; and I may add, that, in the paroxysm, the patient should at all times prevent the heating influence of the fire in his apartment from being received on the inflamed parts.

*The Pediluvium, Fomentation, &c.*—Hot bathing of the feet is inadmissible while any inflammation remains; and I have even seen the symptoms reproduced by its employment very remarkably, where no hazard of such an occurrence had appeared to exist. Those who have adopted this practice, as a remedy in the paroxysm, have, for the most part, informed me of very unfavourable results. A lady of great nervous sensibility, on the fourth night of the paroxysm, immersed her feet, one of which was much inflamed and swollen, in hot water for ten minutes. Almost instantly the gout quitted the foot; and such was the progress of its transference, that, during the night, it affected the knees, the elbows, and the wrists; never again, in the course of the fit, which was of unusual length, returning to the foot. A gentleman, having gout severely in each ankle joint, immersed the feet in hot water with bran, which gave him present ease, but seemed to occasion a quick removal of the inflammation to the knees and to the elbows, which followed in a few hours; and a tedious fit ensued. I have known, in other instances, that this treatment has materially

aggravated the local inflammation and pain; in which case, no removal of disease has taken place. Poppy fomentation, and the vapour of hot water impregnated with aromatic herbs, have been patiently tried for the relief of pain and inflammation; but seldom with any good result, and more commonly with manifest disadvantage.

Also, when the cleanliness and softening of the skin of the surrounding parts, together with that immediately affected, are desired during the paroxysm, the use of free sponging with tepid water is much to be preferred to immersion. *The muriatic acid bath*, first adopted in France, is still occasionally employed in this country. I have witnessed its effects in one patient, who found from it an aggravation of pain and inflammation. Some inform me, that they have obtained relief from this remedy. It appears to me an injudicious practice, and to be either too exciting or too relaxing, according to the degree and continuance of temperature at which it is employed.

I know a gentleman of great intelligence, much subject to gout, who is partial to the use of heated air as a remedy, which he obtains by burning alcohol at the extremity of a tin tube, bent in its form, and connected with a wooden cradle, to be received under the bed clothes, so that the air has free circulation. He finds that, in about twenty minutes, it begins to produce perspiration, which soon becomes profuse. He states that he has materially reduced the duration, and the degree of pain of his paroxysm, by this treatment; and is convinced that he has also, on several occasions, effectually carried off the gout by the skin. I had the opportunity of witnessing the operation of the remedy in this gentleman's case, and came to the following conclusions. It appears to me that this process constitutes a very inge-



nious mode of procuring to the body a medium of warmth in which, from the blood being universally determined to the skin, general perspiration, under favourable circumstances, becomes speedily excited. I think it calculated to answer a very useful purpose in the cold fit of any fever which is forming; and in the chilled state of body after any hazardous exposure to wet and cold. As it regards the gout, notwithstanding the favourable report which this gentleman makes of its effects, I do not consider it an appropriate remedy on a general principle; although there may be circumstances, under which, in the first invasion of the fit, its use would be highly rational. I have lately stated my objection to the plan of excessive perspiration in the cure of a gouty paroxysm; and, in addition to what I then observed, I may again advance the argument, that as this disease has its seat only secondarily on the surface of the body, and is, in its true character, radically depending on an obstructed and vitiated condition of the digestive organs, and the liver especially, with a disordered state of the nervous system; so, in conformity with this view, the use of diuretic purgatives, of mild alterative medicine, and of sedatives, forms the most direct and efficacious method of cure.

This is the statement regarding the present remedy which I formerly offered; since which, I have had an inducement to make trial of it in a very urgent case of gout, which had been excited entirely by exposure to cold. Lumbago was joined with acute gout in the feet, knees, and hands. The patient was so heavy and corpulent, that there was unusual difficulty in carrying into full effect the general plan of treatment which I have been studious to recommend. I employed, therefore, this apparatus, and not without some good effect. The heat immediately produced was more than comfortable,



and indeed rather distressing; and very copious perspiration followed, which proved useful. But, as I expected, it was only auxiliary to the other treatment, which was indispensable; and which, to the utmost extent that it could be conveniently employed, consisted of the means already laid down. I found, in this case, great advantage from the use, at short intervals, of Dover's powder and saline medicine; and had indeed great cause to approve this sedative part of the treatment. I administered, occasionally, calomel and James's powder, with colocynth, and the draught, p. 198, every day in the early part of the paroxysm, with more or less frequency. The lotion in the form of poultice also proved highly useful.

I have no doubt that there are many circumstances of disease, under which, it being difficult to effect perspiration by ordinary means, the use of this apparatus will be found particularly serviceable; and the facility with which it is used is no slight recommendation of the remedy.

*Poultices*, as a mode of evaporation, either simple or variously medicated, have been generally considered useful. Sydenham speaks of having derived some occasional benefit "from a cataplasm made of white bread and saffron boiled in milk, with the addition afterwards of a small quantity of oil of roses." Observation has convinced me, that a free employment of relaxing poultices, made in the ordinary way, has the disadvantage of increasing œdematous swelling, and subsequent debility. I have, however, found great cause of satisfaction in the occasional use of a poultice, made by means of bread and the lotion, which I shall presently describe. To bread finely grated add the lotion, and mix well into a soft consistence. It should then be warmed by placing the thin basin in which it has been prepared, in another larger basin containing boiling water. It is to be applied,

thick in quantity, very moist, just tepid\*, and without any intermediate covering between it and the affected part. When the hands and feet only are the seat of complaint, I have for the most part been in the habit of using this poultice at night only; and a time when the patient wishes for quietude, and cannot allow of the same frequency of attention that is offered in the day; and which is necessary to the effect of evaporation by means of the lotion. But for the relief of the knee and elbow, I have usually found the poultice to be very much more useful than the lotion applied by compresses; and have directed it to be repeated twice or thrice in the twenty-four hours, according to circumstances. Many patients have extolled the effect of this poultice in very high terms; and my late experience with it authorises me to recommend it as an excellent remedy. I was consulted by a gentleman, ill with acute gout, who had previously been applying poultices of bread and water without the least relief; but on using the one now under description, he experienced prompt and decided benefit. For a short time after the discontinuance of the poultice, the part should be covered with a single layer of flannel; for the obvious reason of preventing the supervening of rheumatism.

M. Guilbert offers the formula of Pradier's cataplasm, and enters at some length into its *modus operandi*; recommending it as a remedy in the paroxysm, unless "inflammation runs high, with a great sanguineous determination to the parts." He advises it also when gout is hovering about; and says that it is desirable by this means to deve-

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\* A hot poultice is improper; for, in addition to the debility to which it leads, it renders the part very liable to be affected with rheumatism.



lope its action. I quote the following translation from Dr. Johnson.

“ *Pradier’s Cataplasm.*—The registered composition of this remedy stands thus: Take balsam of Mecca six drachms, red Peruvian bark one ounce, saffron half an ounce, sage an ounce, sarsaparilla an ounce, rectified spirit three pounds. The balsam of Mecca is to be dissolved separately in one third of the spirit; the other ingredients being macerated for forty-eight hours in the remainder. The two liquors are then to be filtered and mixed together. When wanted for use, this tincture is to be diluted with two or three parts of lime water, and as a precipitate takes place, the bottle is to be shaken when the contents are poured out. A poultice of linseed meal is now to be prepared in sufficient quantity to envelope the foot and leg up to the knee. It should be of a good consistence, and spread an inch in thickness, on a napkin of proper size. If both feet are affected, it requires about three pounds of linseed meal. When the poultice is spread even, and ready for application, about two ounces of the above-mentioned liquor are to be diffused over the surface of the cataplasm, and then the foot and leg are to be immediately enveloped with it; and over all, another covering of flannel, secured by a roller. It is not to be changed for twenty-four hours.”

Two French gentlemen who have been under my care, were treated with this poultice; one of them under the superintendence of M. Pradier. They state that the pain was much aggravated by its application, and that great subsequent debility was produced. They added also that “the flesh was so loosened, it appeared as if it would fall off from the limb.”

When the gouty parts are still affected with uneasiness and tenderness, either as consequent to the acute form of



the complaint; or altogether from being under the influence of chronic gout; I find much advantage derived from the application of the soap plaster of the Pharmacopœia, spread on linen or soft leather; using it at night only, and the lotion in the day; or continuing it to the part wholly, as the only local remedy. One gentleman finds so much benefit from its use when applied to a part not severely affected by gout, that he confidently expects the removal of the pain and tenderness in about twenty-four hours. I have to conclude with observing, that, during the paroxysm, if the affected parts are cool and free from pain at the period of bed-time, all local treatment may be omitted till the following day; and no unusual covering of any kind need be used.

*Of other Modes of Evaporation.*—The practice of Dr. Kinglake (for so it may be designated, although originally derived from Hippocrates\*, and other ancient writers) seems, and most justly, to have fallen into disuse among most of those who were its first promoters. Dr. Kinglake introduced this treatment on the narrow principle of considering the gout as a local disease, and as analagous, in this respect, to simple inflammation. Such confined and erroneous pathology requires not any serious refutation. That the gout is sometimes *comparatively* very much a local complaint, is a position not to be denied; and the *cold water* practice in the paroxysm has occasionally been successful. It appears to me, however, a more safe and correct conclusion, to consider that gouty inflammation is always more or less intimately connected with the system; and that it requires a treatment in conformity with this principle. When we reflect on the facility with which gouty inflammation is trans-

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\* Aph. xxv. sect. 5.

ferred from one part to another, the sudden repelling influence of intense and continued cold must appear, even in theory, full of hazard; and in practice, its bad effects are now notorious. Indeed, from all that I can learn of the practice of applying cold water, the relief is never so certain as the danger; and I could enumerate many instances, in which the patient has, in the very beginning of the treatment, received a timely alarm from a sudden spasm at the stomach or diaphragm; and well-attested cases of danger might be quoted without number;—a few also, certainly, of speedy death as the consequence. The immediate abatement of pain is often followed by numbness, increased swelling, and much continued uneasiness; and in muscular and tendinous parts, its influence is by no means favourable to the free return of motion. Some persons relate that although the pain and inflammation have been relieved, yet the fit has not been rendered shorter than usual. In other instances no palliative relief has been obtained. Even in its most successful operation, the effects are too suddenly produced. The cure is rather local than constitutional; whereas we should consider that we have a two-fold object to accomplish.

In this disease, indeed, it must be steadily kept in view, that our first and sovereign object, is the constitutional treatment; and that local treatment is of secondary importance: but that this last consideration is nevertheless a point of great magnitude, cannot, upon any reasonable grounds, be denied. The certain consequence of *neglected* gouty inflammation is, sooner or later, permanent debility and lameness; and, as we see by many melancholy examples, the patient, eventually, is often disqualified by the crippled state of his limbs, from the degree of exercise which is equally essential to his health

and to his comfort, even in such his limited state of enjoyment.

It had long since appeared to me, that a more gradual exhaustion of the inflammation, and a more soothing mode of effecting this than can be obtained by active cold, might be free from all the objections and disadvantages of the treatment in question. It seemed also not unreasonable to expect, that a moistened evaporating surface would procure very different sensations to the patient, from those which accompany a dry and burning heat of skin; and which, gouty inflammation so certainly produces.

I have now the satisfaction to state, that in many hundred cases, I have made very free use, and with the best success, of the following lotion :

R.     Alcoholis, ℥iv.

Misturæ Camphoræ, ℥viii.—Misce fiat Lotio\*.

It is to be applied to the affected part by means of linen rags, first rendered just agreeably luke-warm, by means of immersing a thin cup containing it, in a basin of very hot water†. In this manner, a prompt and convenient method is afforded of using the lotion, on the principles on which I recommend its use. The rapidity with which the alcohol alone would evaporate, is

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\* I find that these proportions form a more useful application than when rather more diluted, as I formerly directed.

† Mr. Garden, Oxford Street, has contrived a convenient portable apparatus for the purpose of warming the lotion, which answers remarkably well.



advantageously restrained by the dilution with the camphor mixture; and the warming it, by means of hot water, preserves it from that escape of the volatile parts, which the sudden heat of the fire would occasion. In using the lotion, if it be applied either hot or cold, the intention of the remedy is considerably frustrated; and I have observed, that from being made too warm, its operation has been injurious, rather than beneficial. The application of it cold would be attended with the risk of checking the gouty action too suddenly. If the temperature be measured by the thermometer, I may state that it ought not to be less than  $75^{\circ}$ , nor more than  $85^{\circ}$ . I consider, however, that the expression of *just agreeably lukewarm*, is a secure and sufficient direction to the patient. The linen compress, constantly kept wetted with the lotion, should consist of six or eight distinct folds, one laid upon another; and the slightest and coolest covering only should be used in addition. I repeat that the linen compress should be re-wetted, instantly that it becomes almost dry. The effects of this lotion, when it has been attentively employed, have been most satisfactory, and have really answered my most sanguine expectations.

The plan just described of using the linen compress, is the most efficacious; but as during the night it cannot be pursued with the necessary frequency, it becomes convenient to cover the compress, with a single layer of white umbrella silk, which causes the rags to remain damp for several hours. This layer of oil silk should not be larger than the linen compress. If the gouty part be enveloped by it, an unfavourably heating effect is produced.

When the foot is the part affected, and the patient is not confined to his bed, I direct, as a method of great

convenience for the application of the compress, that the foot of the stocking be cut off from the remaining part. By this means the pain and difficulty of drawing off the stocking is avoided.

In the extensive opportunity which I have possessed of putting this local *méthod* of treatment fully to the test, I have only met with three instances in which I found that the lotion had been laid aside from disapprobation. In the one case, the nervous system of the patient was peculiarly sensible; and at the same time, the gouty inflammation shewed an unusual disposition to quick transference, and to fix severely in every part. The lotion appeared to irritate rather than relieve, and was on this account discontinued. In the two other cases, it produced this last-mentioned effect only in a slight degree.

In the third example, the substituting of water for the camphor mixture in the dilution of the alcohol, was successful in preventing its causing any irritation. On a subsequent occasion, the first patient to whom I now allude, was again ill with acute gout; and I had the opportunity of making trial of the lotion by a little variation in the mode of its application; namely, the parts were freely sponged with it every hour, and then covered with a thin layer of flannel. In this manner it did not disagree, although I must confess that it was not so useful in its effects, as it commonly proves. If the patient be governed by his sensations, he cannot fall into error in the use of the lotion. When the inflammation so far abates that there is scarcely any morbid heat requiring to be carried off by evaporation, it is probable that its application would rather occasion a sense of coldness, than the soothing feeling before experienced. This is an instruction that the wetted compress should no longer be



left on the part; and that free sponging more or less frequently is to be used instead. For example, take two hand-basins; place one in the other; pour very hot water in the under basin; some lotion in the upper; and proceed to sponge the part freely for several minutes; repeating the process every two, three, or four hours, according to the remaining degree of complaint. Such covering should then be put over the part as the patient may choose, the proper intention being to produce that degree of warmth which is exactly comfortable. If the hand be the affected part, it may be left uncovered.

I have not in any one instance discovered, from the most unlimited free use of this lotion, that it has had the smallest tendency to produce retrocession, even with patients who have on other occasions suffered actual transference to internal parts, from the influence of exposure to cold.

Some who have formerly applied cold water according to Dr. Kinglake's plan, with more or less cause of alarm from its effects, have used this lotion without the least disagreement. I may add the same account, in the instance of a gentleman, who had, in a former fit, made use of a lotion of liquor ammon. acet. and alcohol quite cold. In a few hours after its first application, being seized with extraordinary giddiness and confusion of the head, and numbness in the affected foot, he desisted from the treatment; and, with much terror of the result of his proceeding, he resorted to the readiest means of restoring the warmth of the limb.

In the cases to which I have just now alluded, the disagreement of the lotion was only local. No internal part was in the slightest degree affected. It will be readily imagined that its operation cannot prove equally beneficial to every patient, in a sensible and immediate



manner; or to every part under inflammation, in the same degree. The majority of persons, however, have praised even its immediate palliative effects in very strong language of satisfaction, and have called it soothing and delightful. It is an agreeable circumstance that its odour is pleasant and refreshing.

In order briefly to exemplify the effect of this evaporating treatment, and how much it is capable of relieving the painful symptoms, I quote the following report from two patients, given in their own language: and I can with truth add, that these statements are by no means too partially chosen from amongst my cases.

A gentleman was severely attacked with gout, which affected in succession the right hand, left foot, ankle, and knee; right foot, ankle, and knee; and lastly the right hand. He stated of the lotion, "I must unequivocally declare, that the benefit I received from the application was great, beyond what I could have expected, and infinitely mitigated the usual throbbings consequent on gouty inflammation. My right hand first yielded to its influence, the pain and swelling gradually subsiding; and in a few days all vestiges of either were removed in it. The other parts affected, nearly I believe in the order in which they had been attacked, exactly followed the hand, the swelling *gradually* disappearing, and leaving the joints unaffected by the least hardness."

Another gentleman, much subject to violent paroxysms, was attacked with the usual severity in both feet. He began some purgative diuretic medicine late in the evening, and went to bed, not having made use of the lotion. The pain became intense; the heat and throbbing were excessive; and it appeared to him that the parts "were tearing and separating in the sinews." At about six in the morning, having passed a sleepless

night, and still in agony, he applied the lotion, and, in less than an hour, the pain so much subsided, that he fell into a refreshing sleep. He awoke free from pain. His medicine did not act until the middle of the day; and he praised the lotion as the surprising source of his comfort. Two days after, the hand was affected, and became equally relieved by the free application of the lotion.

It is necessary to observe, in reference to the narration of the first case more particularly, that the internal means of treatment were adopted with very active attention; and that the patient's expressions of approbation of the lotion, must be received in connexion with the effects of the still more important influence of internal medicine.

To continue my account of this remedy, I may state that in slight inflammation and pain, its powers of affording relief are soon discovered; and very sensibly acknowledged by the patient. Under symptoms of great suffering, although its influence is very beneficial, it is inadequate to procure ease; and it is in *opium* (the proper indications, as already stated, being fulfilled) that our superior and most necessary confidence must then be placed.

The good effects of the lotion are most remarkably seen, when gouty inflammation is situated in the superficial ligaments, tendinous structure, and common integuments; and it will be readily supposed, that in proportion as the seat of disease is remote from the surface, its operation will prove less efficacious: as, for example, when the deep-seated ligaments, and the bursæ mucosæ, particularly those belonging to the knee joint, are the parts affected. In such cases, it has of late been my practice, chiefly, to confine myself to the use of the poultice made with the lotion; in general, directing it to be



renewed thrice in the twenty-four hours. I have procured the best effects from this treatment. When the inflammation has been almost overcome, I have discontinued the application of the poultice, and resorted to the frequent sponging of the part with the lotion, in the manner lately described.

Upon the practice of effecting slow evaporation from the inflamed part by means of this lotion, I may be allowed to indulge in a few further observations.

The application being used at a heat only just tepid, it has a pleasing soothing influence; and its more active operation is obtained so gradually and securely, that I have never been able to lay any bad effects to its charge. Of its advantages, much might be said. In the same degree that we mitigate the local symptoms, we tend to relieve the general irritation of the constitution, and help to abridge both the violence and duration of the whole disease. It is also a fair subject of consideration that present relief is not the only benefit that is gained. This lotion, independently of its powers in removing the inflammation as an evaporant, stimulates the absorbent vessels to useful action; and, further acts as a tonic to the parts, greatly counteracting the ordinary debility which follows the inflammation of such important textures as the gout affects; and which debility is especially produced by the peculiar action of this disease. In our successful treatment of the local inflammation, we accomplish much towards the preservation of the organization of the affected parts; preventing the deposition, and enlargement, which with certainty result from the inflammatory action left to its own course and termination. I do not hesitate to affirm, as a general position, that, with *timely* management of gout, a crippled state of limbs may with certainty be prevented.



With regard to the wandering character of gouty inflammation, I have not observed that this local treatment has increased the disposition of the disease to change its situation, unfavourably; and in no case, I must repeat, has any injury followed its most free employment.

I may affirm that I have found the gouty inflammation to keep its station in one particular part, in the cases of patients who have used the lotion with the utmost freedom, quite as remarkably as when no local treatment has been employed; and I have been assured by many that the lotion even appeared to have the effect of confining the gout to one part.

The inflammation often quitting one part, and immediately affecting another, is an action of the disease which may be called its natural disposition, and should not be imputed as a necessary consequence of local treatment. This being therefore the well-known character of gout, we are to pursue our treatment with the same confidence that we began it.

When the pain produced by gouty inflammation is of so severe a nature that the utmost fortitude of the patient is put to trial, I have been led to think of additional methods of procuring relief; and it is with much satisfaction I state that the application of the following ointment has been attended with remarkable success:

R. Extract belladonnæ, ʒi.

Unguent: cetacei, ʒi. M.

· Fiat unguentum.

This is to be spread on a piece of lint, and most commonly I direct that the poultice made with the lotion be applied over it.

I shall make further mention of this remedy in some of the cases which I shall relate.

In conclusion, I have further to assure my reader, that the interruption of the paroxysm, by the combined method of practice which I have endeavoured fully to lay down, has not been attended with the serious objection to which some remedies are liable, namely, its inducing an earlier return. On the contrary, however, I can with truth declare, that if the patient adhere steadily to the continued rules of treatment which it is the duty of the physician to prescribe, this first abridgment of the paroxysm by active practice, is at once the safe and direct method of striking at the root of the disease.

The occasional transgression of the patient, in taking too early an advantage of his amendment, or in abuse of rules after recovery, is not a fair impeachment of the propriety of the past treatment in the paroxysm.

The constitutional remedies, as already mentioned, having been employed to the necessary extent, and the evaporating treatment having fully produced its auxiliary effects, in the entire removal of all inflammation, we arrive at the next distinct stage which requires consideration.

## THE CONVALESCENCE.

IN the early and least severe visits of the disease, the state of convalescence, as to constitutional management, may now and then require no other attention than what is prompted by good sense, and the consequent exercise of correct habits. In older and violent paroxysms, the continued assistance of the physician is of the utmost importance.

Those tedious fits which run a neglected course of many weeks or months, and even those which have been correctly treated, but yet show a strong disposition to relapse, may always be considered as radically depending on the presence of visceral disease of more or less magnitude. It is incumbent on us to be convinced that the patient is really convalescent. It is not sufficient that our treatment has been active in the paroxysm. We have a great and two-fold duty remaining to be performed; the restoration of the healthy state of the digestive functions, and of due strength to the weakened limbs.

It occasionally happens, that the returning powers of the stomach demand, rather that the patient should exercise a degree of self-restraint, than that his appetite should be excited by medicine; and careful regimen, both as to diet and exercise, early hours, and a due regulation of the bowels, may constitute in such case all that is necessary to restore the general health. *Festina lenté* should be the constant motto, both of the physician and the patient. We should restrain the tendency of the vessels to acquire again the plethoric state; and keep in our recollection, that excess of blood in a weakened circulation will lead to many evils even worse than the gout; and the gout itself may, or may not, follow as a consequence. In judging of the propriety of employing bitters, or other stimulant tonics, simply, we should carefully ascertain that the secreting functions are become regularly healthy; and this inference must be drawn from the appearances of the tongue, the fæces, and urine: and where it is necessary to make the judgment still more accurate, the specific gravity of the morning urine may be examined from time to time.

It does occasionally happen in certain constitutions,



that simple debility alone exists; and in that case, simple tonics only need be employed; the proper attention being at the same time directed to the regulation of the bowels. With this view, I have now and then derived advantage from the use of a chalybeate; but I have not proceeded with its use beyond a short period, so much is it the property of chalybeate medicine to excite the circulation unfavourably, and lead to a recurrence of gout. Where the habit is plethoric, the administration of steel should be considered, as a general rule, to be quite forbidden. In the instance of a gentleman of the nervous temperament, of a slight form and not plethoric, his debility being very great after a protracted fit of gout, the legs œdematous, and the urine albuminous, I prescribed the ammoniated iron with soda in pills, with great advantage; regulating the bowels with the pulvis aloës compositus, formed into pills with the decoction of the same, and a little soap.

The *tinctura ferri ammoniati* is a delicate preparation of iron, and may be conveniently given in the infusion of *Columbo*, made grateful with *tinct. aurant.*; or in water, cold or warm, in a dose ranging from twenty to sixty drops, it being gradually increased.

Dr. Cullen, in speaking of tonics under the head of gout, remarks, "The most effectual medicine for strengthening the stomach is iron, which may be employed under various preparations; but to me, the best appears to be the rust in fine powder, which may be given in very large doses." I have thought, that this very insoluble preparation of iron is the most objectionable of all its forms; and, as I have remarked in my *Analysis of the Chalybeate Water of Tunbridge Wells*, the most soluble preparations of iron may certainly be esteemed the most active and useful. I continue to en-

tain this opinion as regards the usual employment of iron as a tonic, but when its mere specific action is desired, it would appear that the subcarbonate does usually become the most efficacious. The valuable report of Mr. Hutchinson on the effects of this medicine in tic douloureux, serves to shew this fact. In the same manner we employ bark in large doses in substance, when we treat an intermittent; although, in the ordinary use of the medicine as a tonic, we derive more advantage from the lighter preparations, as the decoction and tincture.

The *mistura ferri composita*, fresh prepared, affords the most of a *carbonate* of iron, and is a very useful preparation. The tincture of muriated iron is one well deserving recommendation, though less delicate than the ammoniated tincture, and therefore not so generally admissible; but if suitable, it may be usefully joined with the infusion of columbo, or of orange peel. And certainly, when, from great debility of the constitution, the skin is so relaxed, that, on the slightest exertion, perspirations with faintness take place, the muriated tincture may prove a very useful astringent tonic.

The case of a gentleman presents itself to my recollection, in which, from the error of leaving the paroxysm to its own spontaneous course, such a state of debility resulted, that for a considerable time most profuse perspirations took place at night, joined with great general debility and much œdema of the lower extremities. Here, the muriated tincture, with cascarilla, proved very useful. Advantage was also derived from sponging the skin very generally, night and morning, with vinegar and water, slightly tepid; local treatment was used for the recovery of the limbs; and the diet was made restorative, more especially by the use of solid than fluid nourishment.



It is important to observe, that a paroxysm of gout, correctly treated, never leads to the debility which is here described. It arises generally out of the fruitless efforts of the constitution to get rid of the disease; and its consequent protraction to a period almost indefinite: or it may be the consequence of injudicious empirical treatment. It most commonly happens, that, although the patient be left by the paroxysm in a state of debility, there is that condition of the constitution which rather requires the use of corrective and tonic medicine in combination, than of tonic astringents simply. It may be stated as a general rule of practice, that in the convalescent stage, our treatment should be such as is calculated to answer a part or all of the following intentions.

The stomach is to be restored to its proper energies; the liver to its healthy state of functions both as an organ materially concerned in the just balance of the circulating system, and as furnishing by its secreting action an important stimulus to the digestive process; the bowels are to be brought to their due and regular action; the kidneys to their share of duty in separating from the blood itself what is intended to be excrementitious; the skin to an equal and uniform office of insensible perspiration; the animal heat of the body to a proper standard, and an equal distribution. If these points be accomplished, the nervous system will require no other assistance by medicine; and equally useless and improper are stimulants given to the nerves, when the condition of the various functions just mentioned is neglected.

Sydenham, after many excellent observations on general rules of management, says, "It is clear, from what has been delivered, that whoever undertakes the cure of this disease, must endeavour to make a thorough change of the habit of body, and restore it to its former



constitution, as far as age and other circumstances will permit."

It may be laid down as a very general axiom, that in every case, in which the constitution has been much under the influence of gout, the liver is more or less obstructed, and under error in its secreting functions; and also that such a condition of the digestive organs prevails, that, however the appetite may seem active at a favourite meal, the digestive process is imperfect, and the assimilation of the chyle is not completed in a manner favourable to perfect health. This, therefore, is the period at which the skill of the physician is to be exercised with the greatest attention; and the patient is to consult the future welfare of his constitution, by the careful observance of all the rules which are laid down.

The particular method of treatment which the convalescent period may require, must obviously vary in its shades of difference, as much as every case itself varies in some of the particulars, of the age, constitution, temperament, and habits of the patient; and the peculiar individual features of complaint. And unless we make this discrimination in practice, we render ourselves truly empirics. It is with this provisional restriction, that I now enter on my further details.

In a large proportion of cases, I have not found it necessary to make use of bitters, or any description of tonic medicine; and I have, on the other hand, preferred to pursue a mild course of aperient and alterative medicine; in conjunction with a regulation of the diet and general regimen.

In those instances, in which, a languid state of stomach and deficient appetite do suggest the propriety of using a stomachic medicine, I can much recommend the following combination.

℞ Calumbæ radicis concisi, ʒi ad ʒiss.  
 Cascarillæ corticis contusi, ʒii ad ʒss.  
 Rhei radicis consici, ʒi ad ʒii.  
 Cardamomi seminum (capsulis demptis) contrit. ʒss  
 ad ʒj.  
 Aquæ ferventis octarium dimidium.  
 Macera per horas duas, et cola.

℞ Hujus infusi, ʒxi ad ʒxv.  
 Tincturæ Aurantii, ʒj.  
 Sodæ Carbonatis, gr. x. ad gr. xv. M.  
 Fiat haustus bis quotidie sumendus.

It is sometimes an advantage to increase the proportion of the carbonate of soda in this draught to ʒss, and to direct a dessert spoonful of lemon juice to be mixed with it: so that, taken in effervescence, it becomes a more agreeable, and often a more useful, medicine. When the palate of the patient is more to be studied, or the delicacy of the stomach require it, the rhubarb should be omitted, and pills, consisting of pulv. rhei, pulv. aloës, compos. et sapon. dur. to be taken at bed time, may be substituted for it. As another form of tonic stomachic medicine, which I have found to agree particularly well with the gouty and dyspeptic stomach, I may mention the union of decoct. aloës compos. infus. gentian. compos. et mist. camph. with a moderate addition of spir. ammon. compos.; to be given once, twice, or thrice in the day, accordingly as the languid powers of the stomach and nervous system may require its use.

As an alterative pill, to be given with the view of exciting healthy secretions, and administered in a dose of five grains every other night, the pilula hydrargyri sub-

mur. compos. has appeared to me more decisive in its good effects than the pilula hydrargyri\*.

In these examples of convalescence, when an attention to the bilious secretion and the action of the bowels is alone required, it will often be sufficient, with regard to medicine, to administer the alterative and a purgative pill on alternate nights. This latter pill may consist of suitable proportions of gum. gambog. pulvis aloës compositus, et sapo durus. A pill, containing from half a grain to a grain of the submuriate of mercury joined with three or four grains of compound extract of colocynth, given each night, or each other night, at bed time, usually agrees very well as an alterative aperient. The patient, under this course of medicine, should receive particular injunction to avoid any careless exposure to wet and cold, at all times a matter of some hazard to a gouty person; and such caution is the more important, when we consider that the gout chooses that season of the year for inflicting its worst pains, when wet and cold almost constantly prevail. Still the necessary treatment must not be deferred; for I can scarcely conceive that any one, however circumstanced in occupation, can find a real

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\* It may at first sight appear immaterial, whether corresponding doses of the pilula hydrargyri, pilula hydrarg. submur. compos. or hydrarg. oxydum ciner. be employed; but experience teaches us that each of these preparations possesses considerable difference in its action; and we find accordingly, that, with particular individuals, one preparation will agree, when another has failed.

It is a circumstance always demanding careful consideration, that the quicksilver which is used in the preparation of the pilula hydrargyri, should be perfectly freed from lead or other contamination, by distillation.



difficulty in observing those moderate rules of care in clothing, and general means of security, which common prudence itself points out.

Some individuals have a peculiarity of constitution; and, also, the constitution of any individual may be in such a peculiar state; that the administration of a mercurial alterative, even though given occasionally only, and in a small dose, must be a matter of careful consideration. A very white appearance of the tongue, joined with much nervous irritation of the system, comprise a strong contra-indication to the use of mercurial medicine, as a general rule; and should make its continuance questionable, if arising as the evident or suspected result of its influence, when it has been employed.

As forming a part of the alterative and restorative plan of treatment, I have, with great success, prescribed an infusion of the cortical part only of the root of sarsaparilla in lime water\*, in the proportion of half an ounce to a pint. I direct as a dose, three ounces, to be administered with an equal portion of milk made hot. This medicine has a very useful influence in correcting the state of the secretions; in favouring the action of the bowels; and acting as a gentle tonic to the stomach, without stimulating.

The peculiar kind of diet, which may be most appropriate, must, as with regard to medicine, be suitably varied for different persons; but to the prudent, a few

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\* Cold lime water takes up rather more of the principles of the sarsaparilla, than water even with the aid of boiling heat. It is no longer alkaliescent. If the whole of the root be used, the infusion sooner becomes putrescent; but when the cortical part only is employed, the infusion keeps perfect for a considerable time; and it appears to me probable that all of the root, except the bark, is comparatively inert. It seems to be chiefly mucilaginous matter.

plain rules will prove a sufficient guide. I think it, however, necessary to observe, that the general rule of moderation in diet at the convalescent period, which is so important a point of observation, is sometimes carried to an injudicious degree of abstinence; and much debility of the system becomes the consequence. I saw lately a striking instance of this result, in a gentleman, who pursued unnecessarily a course of low diet, when all the inflammatory action of the paroxysm had been perfectly removed. It brought on so much constitutional relaxation, that petechial spots (*purpura simplex*) appeared in various parts of the body, together with œdema of the ankles, excessive languor and depression, and a disposition to perspire profusely on slight exertion. All the symptoms soon yielded to invigorating treatment.

While on the one hand, therefore, we avoid that repletion of vessels which too much indulgence would produce; we should, on the other hand, equally guard against incurring a state of inanition and debility, by an extreme restraint of regimen.

The use of ass's milk, as a mild nutritive diluent, is particularly deserving of recommendation, when it is our object to pursue the restorative plan of treatment in the most efficacious manner. Half a pint should be taken every morning early; and, if convenient, should be repeated at night. It often has the property of acting gently as a medicine both on the bowels and kidneys; and has a very favourable influence on the stomach itself\*.

The advantages of a good air, and of a change of air and scene, with a suitable portion of exercise, are points

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\* Ass's milk was much extolled by Hippocrates, Celsus, and Pliny, in the cure of the gout.



of obvious importance towards the perfect establishment of health. As the present subject of general management will again come under our notice, in the consideration of *prophylactic regimen*, I proceed now to discuss the treatment of the weakened limbs.

The permanent œdema, and excessive debility, almost amounting to paralysis, which are sometimes consequent on the paroxysm, are more especially the effects of warmth, and of relaxing treatment, and may be prevented by correct proceeding; but present care cannot always repair the evil of former error; and it becomes sometimes a difficult task to invigorate the enfeebled limbs.

When, in addition to the ordinary debility of the limbs remaining after the perfect removal of inflammation, œdema takes place; the use of rollers, which may consist either of calico or flannel, according to the season of the year, is of important service. In any instance in which the veins are varicose, this treatment is indispensable. Also, when remarkable weakness of the ligaments prevails, so that the patient feels the want of support in the ankle joints, the bandage will be found a source of comfort and advantage.

I have sometimes seen, that, from nervous irritability, the patient at first objects to the sensations of restraint and pressure from a bandage; but a little resolution may cause these soon to be disregarded; the degree of tightness being duly regulated.

At this period, the patient should adopt the practice which I shall more particularly describe at a future page, of sponging the affected parts with salt water, rendered slightly tepid, every morning. The skin being wiped carefully dry, diligent friction with the hand, or flesh brush, should be continued, till a comfortable glow in the skin is produced. This method will supersede the



necessity of immersing the feet in warm water, which is commonly practised from motives of cleanliness or comfort; but of which I disapprove, as tending to increase debility.

If the paroxysm has, in all respects been correctly treated, it seldom happens that additional remedies to this plan are required for the restoration of the limbs; but when, from any cause, an extraordinary degree of debility exists, so that there is great deficiency of energy both in the blood-vessels and nerves, together with the relaxation of the ligaments and muscles; as indicated by œdema, coldness, paleness of the skin, inability to bear the weight of the body, difficulty in walking, and an evident feebleness and shrunk condition in the muscular fibre; we must, in addition to the morning plan of sponging, apply, with a due share of friction, a stimulating liniment. The following formula I have found remarkably successful. It is to be made more or less exciting, as the individual case may require; this being a point deserving most particular attention.

R<sub>x</sub> Tinct. lyttæ, ℥ss.

Linim. camph. compos.

—— saponis compos. āā ℥iss. M.

Fiat linimentum, quocum partes affectæ diligenter fricenter semel vel bis quotidie.

In urgent cases of the present description, the systematic method of friction, which I shall have to mention when speaking of chronic gout, will be found necessary to complete the plan of treatment; in order to hasten the recovery, and give a vigour to the limbs, which they may not probably have possessed for many previous months, or even years. In further illustration of the principles

of practice which I have advanced, I shall now offer a series of cases, transcribed from the register which I kept of them. - A few of these I shall state with minute detail; but others I shall condense for the sake of my necessary limits; endeavouring, at the same time, to retain such particulars as appear the most important and instructive; and, for the more complete elucidation of my subject, annexing to the narrative occasional commentary remarks.

### CASE I.

W. W. a coachman, aged 60; tall, of stout make, was originally robust and vigorous, but now his muscles, and particularly those of the lower limbs, are small and weak; has a circular chest; of sanguineo-nervous temperament, plethoric habit, and irritable disposition. Occasionally has nephritic complaint, and once, a few years ago, he suffered very severely with retention of urine and severe spasms of the bladder. He is frequently, of late years, dyspeptic; his tongue is always more or less furred; and his nose and face exhibit the *gutta rosacea*\* in a great degree. With such exceptions, has never had any other disease than gout. This disease quite unknown in his family. When young, he was fond of athletic exercise. Having always lived in good places as coachman, and for a part of his life kept an inn, he has had very constantly the means of indulging in free living. He describes himself "as a moderate eater, and for many years past, particularly, not indulging freely in liquors;" but ac-

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\* *Acne rosacea*.—Bateman.

knowledges, that he has regularly been in the habit of taking porter and mixed spirits. When he has occasionally exceeded in a glass of raw spirits, he has experienced much consequent heat of stomach, a feverish state generally, and now and then a paroxysm has followed such irregularity. His first attack was at the age of thirty. He says he was in full health at the time. He had been bathing in the sea, and, when returning to shore, contused his foot severely on some rock. He reached home without much inconvenience, and went to bed well; but in the middle of the night awoke with pain in the great toe of this foot: it was decided gout, and continued a fortnight. It returned in two years after, first in the same foot, and then in the great toe of the other foot. This second fit lasted a month. He soon became a confirmed gouty subject, seldom escaping a whole year; more commonly affected twice a year; but his chief fits were in the beginning of spring, and were remarkably periodical in their return. He imputes his attacks most commonly to wet and cold; but some of the severest have followed blows and strains; and the most violent fit which he ever had, succeeded immediately to a bad strain of the ankle. On that occasion other parts became affected; but in some of the fits excited by local injury, the disease has confined itself to the part so inflamed. He wears flannel socks, and commonly perspires much in the feet; and he remarks, that a little previous to an attack, this perspiration is often suspended. His usual premonitory symptoms are, depression of spirits, much listlessness and yawning; flying cramps, especially affecting him at night before his first sleep; a cough, with nauseous expectoration. A fit usually makes its invasion about one or two A. M.; but this happens with some exceptions, which are more remarkable when local



injury has been the exciting cause. Some of his fits have continued twelve or fourteen weeks. Three years ago he was bled at Christmas (from choice only, being then as well as usual), and entirely escaped gout the following year.

Progressively he has had gout in every part of each foot, in the knees, hands, and elbows. Has *uric-concretions* at the outer side of each heel, from which, painful ulcerations have now and then formed. A little finger, which was inflamed in his last fit, exhibits the whitish appearance of incipient concretion. Has large distended veins, and those of the legs are varicose. The bursæ mucosæ, both in feet and hands, are either much puffed, or in the state of *ganglion*; the tendons of the fingers are rigid from their distended and thickened sheaths; and from such change of surrounding structure, the phalanges have the appearance of bony enlargement. He has long suffered from constant lameness and uneasiness, both in the feet and hands.

Intending to make this patient the subject of some comparative examinations in regard to the secreting action of the kidneys, I examined his urine on the 3rd of May 1815, when he was not complaining. Having already detailed the particulars of this investigation, at p. 130, I shall, in this journal, for the most part, only state the specific gravity of the urine on the relative days, and the proportion of phosphoric acid. The morning urine of this day was of a specific gravity 1009·4; and four ounces afforded of phosphoric acid ·8 grain.

On the night of the 3rd of May, he was exposed on his box, a considerable time, to wet and cold; and remained several hours in wet clothes. On the 4th, although he went about with difficulty, the invasion of a paroxysm had begun. He was chilly, feverish, and his right arm was

painful. On the 5th (Friday) I visited him, and found him affected with severe gout in his elbow and hand. In each part there was swelling and some pitting; but most at the back of the hand. The skin was vividly red. The usual sensations of acute pricking, tearing pain, burning, throbbing, and weight, were present in an intense degree. He experienced the greatest degree of suffering from the elbow; and the slightest motion of the arm was infinitely distressing. To use his own words, he felt also, "spasms in the limb, and hot glows all over; qualmish and thirsty; sudden perspirations, as suddenly leaving him; heat and spasms in the stomach; spirits very low." Pulse frequent, and rather full; skin hot; tongue much furred; much thirst; bowels costive; the urine passed with frequency and irritation, and in small quantities at a time, as is usual with him under gout. It deposits, on cooling, a copious mucous and lateritious sediment. Its specific gravity 1.0201. Four ounces afforded of phosphoric acid 5.36 grains.

With a view to form some opinion of the comparative quantity of urea in this urine, with what should be found afterwards, at the restoration of the patient's health; and also to judge of its relation in this respect to the urine of other persons in health, I evaporated a given portion to one-third of its bulk, and added concentrated nitric acid freely (about an eighth part). Crystals consisting of urea and the nitric acid, were produced in much greater abundance than I have ever found in a similar experiment with healthy urine.

From the persuasion of a fellow-coachman, he was taking a quack medicine, *Bateman's drops*; and on this account I did not see him again until Tuesday, May 9th, when I began the following journal:

He reports that the drops have occasionally procured



him sleep, and caused much perspiration; but he felt heated by them. Bowels open daily, the last two days. Last night was the worst which he has had; quite sleepless. At five this morning, his agony was very great. Pulse now 84, and full; skin hot; much thirst; no appetite; tongue much covered with brownish white fur. Very restless and nervous; sore to pressure at the stomach, and in the right hypochondriac region. Bladder very irritable; passes much less urine than natural, with frequency and some difficulty. Relates that at all times his bladder is rather irritable; yet in general he has a free and easy stream. I had not the opportunity of seeing this day's urine; but he states, that its appearance was similar to that of the 5th. The catarrhal cough, with which his gout commenced, is much abated.

The elbow is improved since last report; the hand still much affected; thumb the most inflamed part; middle finger much inflamed; vivid redness; no pitting. The whole of the external part of the left foot much inflamed; vivid redness; much bursal distension around the ankle joint, but no pitting; veins very full, and particularly all those ramifying from the inflamed part\*. Two of the small toes red and swollen; much subsultus tendinum. He was seized, first around the heel, with numbness, and sudden entire loss of strength in the foot. Last night severe throbbing; sense of great weight; foot feeling as if not belonging to the leg; tightness; burning heat. The following treatment was adopted:

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\* The veins of the right leg, at the lower part, very full in the line of the inflammation; and altogether fuller than in the other leg. No difference in the veins of either upper arm. In the affected one, the fulness begins at the wrist.



R Hydr. submur. gr. iv.  
 Pulv. Jacobi, gr. ij.  
 Extr. colocynth. comp. gr. x.  
 Saponis duri, gr. ii.—M. fiant pilulæ iij. statim  
 sumendæ.

R Magnes. ʒiv.  
 Sulph. magnes. ʒvj.  
 Aquæ menthæ viridis, ʒv.  
 Aceti colchici,  
 Syrupi croci āā ʒss.—M. Hujus misturæ capiat  
 partem quartem, 6 tâ vel 8 vâ quaque horâ, prout alvus  
 soluta fuerit.

The *Diet* to be limited to gruel, tea, and bread, barley water, or rennet whey. The evaporating lotion according to the formula, p. 272; previously made lukewarm, is to be applied constantly to the affected parts.

*Wednesday Evening*, the 10th, 9 o'Clock.—The medicines have agreed perfectly. The bowels copiously affected twice, at twelve last night, and at eight this morning; the evacuations very green and foul. The pain was very soon much mitigated by the lotion. As soon as the bowels yielded, his skin cooled; he became easy, and passed a comfortable night. He has not perspired. The urine *first* passed in the morning, of an amber colour, with slight pink sediment, and less mucus than yesterday; its specific gravity 1·0099. Four ounces afforded of phosphoric acid 3·17 grs.

He continued easy and comfortable till five this afternoon, when the paroxysm was renewed in the right

ankle; and he is now suffering *such agony*, that he repeats an expression which he has before made use of during the sufferings of this attack, "*that he would be thankful to any one to shoot him.*" The inflammation in the newly-affected foot is deep-seated, as the skin is scarcely discoloured; much bursal and thecal distension; pain shoots through both ankles; violent throbbing and burning; sense of immense weight, and extreme tightness; has frequent spasms, pricking and shooting; subsultus tendinum, and convulsive state of gastrocnemii muscles; receives only momentary intervals of relief. Pulse 72, rather full, but not inflammatory; excessive thirst; skin temperate. The application of the lotion has been neglected this afternoon: now to be used freely and constantly. The bowels having been freely emptied, and constitutional inflammatory irritation being much abated, the indication for direct soothing treatment appeared clearly manifested. I directed the following pills:

R̄ Pulv. opii crudi, gr. xx.

Pulv. Jacobi, gr. x.

Confect. rosæ canin. q. s.—M. et divide in pilulas xx, quarum capiat iii. statim; et repetatur i. omni hora, donec dolor sublevetur.

*Thursday, May 11th, 1 P.M.*—He felt immediate comfort from the lotion; but the great relief, which he very soon obtained, was certainly due to the opium. Even in a few minutes he was a little composed; in twenty minutes, a numbness, rather pleasing, of the affected parts, with an abatement of heat, throbbing, &c. took place; and the convulsive action of the muscles, and the subsultus tendinum ceased in about half an hour.

He did not find it necessary to take a second dose of the opiate. The night was passed in tranquillity and dozing. Now has slight perspiration, and no feverish heat of skin; thirst is abated; tongue rather more furred than yesterday, but he has some appetite; head rather aching, yet has not experienced any confusion; an excellent pulse at 76. He lies upon the bed; and his apartment is kept temperate. Uric deposit appears to be taking place immediately under the cuticle in two of the fingers. Both feet almost easy, and but little discolouration remaining. Bursal distension lessened; there is some pitting of the integuments; fulness of veins much removed; temperature at the right ankle, at present most the seat of complaint, 97°. Has taken the mixture regularly every six hours; it has acted twice freely; the fæces very foul, with much acrid bile, very hot to his sensations, less green than before. Much diuretic effect also from the medicine.

The urine is passed both more copiously and comfortably than at any period since his attack. It deposits dirty brick-coloured sediment, some reddish crystals, and much mucus. Its specific gravity before filtration, 1·0242; after, 1·024. Four ounces afforded of phosphoric acid 3·88 grains.

To continue the mixture every six hours; the opium pill as the pain may require; and, every night, five grains of pilul. hydr. submur. compos. The lotion constantly. Diet as before, fluid and wholly unstimulating; may take bread and milk, or milk porridge, at discretion.

*Friday, 12th.*—Much better. Has not had severe pain; slight accession of symptoms about nine last evening, continuing till twelve; but he did not suffer enough to be induced to take the opium; a small dose of which, however, I should have approved. His night was rather



restless and feverish. The gout, about four A. M. affected one middle finger, but not severely. I find it swollen, hot, and partly red. All inflammation removed from the left foot; a little remains in the right ankle, with slight redness; very little pitting in either foot; little toe in right foot still red and painful; he receives great ease and benefit from the lotion; has taken the mixture at the regular interval of six hours. Pulse natural; spirits improved; surface temperate; tongue less furred; nose, which has been *glowing* red, now getting pale; the heat in the stomach and bowels, of which he has been complaining, is removed. The discharges less heating, but still foul and of yellowish-green colour; no preternatural thirst; no nausea; moderate appetite. The urine has a slight mucous cloud, and no other sediment. Specific gravity 1.012. Four ounces afforded of phosphoric acid 1.02 grains. To continue the treatment.

*Saturday, 13th.*—Going on most favourably; passed a good night; no return of pain; every part almost free from inflammation; and the parts most affected yesterday, to-day bear considerable pressure; feels uneasiness through the foot at the little toe, and there is a slight spot of redness on the upper surface at this part; suffers most tenderness from the old concretions near the heel, but derives much relief from a simple bread poultice; begins to walk tolerably. The medicines have produced their usual effect. The urine similar in appearance to that of yesterday, with the addition of a few minute crystals; specific gravity 1.0105. Four ounces afforded of phosphoric acid 1.47 grains.

*Sunday, 14th.*—Did not pass so good a night on account of pain in the last phalanx of the little toe, and along its metacarpal bone; the spot of redness before

described continues ; the pain was not sufficient to render the opiate pill necessary ; has slight spasms from the foot to the knee ; pitting of each ankle in a small degree, with paleness of skin ; pulse and skin natural ; tongue still rather furred ; three stools in the last twenty-four hours, much improved in appearance, thin and of a light yellow colour, with but little accompanying heat. Urine abundant, of a light straw colour, with a fine flocculent mucous sediment, and a small portion of minute uric crystals ; specific gravity 1·0106. Four ounces afforded of phosphoric acid 3·47 grains.

Has lived hitherto on diluents ; but on this day he has eaten bread pudding, with appetite and relish. The last two nights, has taken the alterative pill at bed-time, till last night ; has continued the lotion to all the parts yet affected with any tenderness.

*Tuesday, 16th.*—In all respects doing well. The urine of specific gravity 1·0085. I discontinued my experiments for the present. The mixture now to be taken twice a day, with 3j. only of sulphate of magnesia as a dose, and the other ingredients as before ; the alterative pill on alternate nights. All inflammation being removed, apply rollers from the foot to the knee ; sponge the extremities with water containing salt dissolved, and the chill removed so as to feel pleasant ; wiping the skin afterwards perfectly dry, and using diligent friction. He expresses benefit from using a horse-hair brush through the stocking. Much caution to be used in diet ; a little animal food of light digestion, once a day, with mashed potatoe, and some fresh table beer. The weather being fine, to be much in the air, and to use gentle walking exercise.

I may here observe, that each day's urine has reddened litmus ; has precipitated reddish-white or brownish-



white flakes, more or less abundantly with oxy-muriate of mercury; brownish flakes with infusion of galls\*; has not suffered any change of transparency from nitric acid; or, from the application of heat.

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\* I have invariably found, that the first urine of the morning, such even as is secreted in good health, *immediately* becomes turbid with infusion of galls, and with the solutions of oxy-muriate of mercury and of alum. The precipitate which subsides, is more or less abundant, and dense and coloured, according to the proportion of saline and animal matter present, and the consequent high specific gravity of the urine. The galls occasion the darkest coloured precipitate. That from the oxy-muriate of mercury is usually most dense, and is often coloured of a reddish hue. It has the appearance of pus mixed with water, and a little coloured. The precipitate produced by the solution of alum is more white and flocculent, and contains also uric acid deposited in crystals.

Mr. Cruickshank has erroneously described the effect of the oxy-muriate of mercury, as being an indication of disease, in the following words (Rollo on Diabetes, 2d edition, p. 443): "The corrosive muriate of mercury is a very useful re-agent, as it has no immediate effect upon recent healthy urine; but in every case of increased action of vessels, more particularly of the inflammatory kind, a greater or less milkiness, and a whitish precipitate, is instantly produced." This incorrect statement is copied by Berzelius in his View of Animal Chemistry, p. 98, without contradiction. That the effect is *greater* in urine of high specific gravity, and therefore in certain states of disease, I have already granted; but the very material mis-statement to which I have referred, deserves, I think, to be pointed out. Dr. Blackall (on Dropsies, p. 15) speaks in doubtful terms of the effect of the infusion of galls, as to the nature and extent of its indication in disease, or, "in some circumstances of *apparent* health." Here, the powers of this re-agent also are not correctly conceived.



*Sunday, May 21.*—Has daily improved in health; appetite good, and digestion comfortable; tongue has still a whitish fur, but it lessens. Walks with much more strength; ankles swell a little after exercise, but the swelling is on the decline; the veins have acquired a healthy appearance, and are even appearing in a better state than before this attack. The bursæ are smaller. The temperature at the ankle, which in the paroxysm was 97°, is now 86·5. The bowels have been kept in a free state by the mixture, suitably abated in the frequency of dose. The fæces, though much improved, are not yet healthy. The urine is quite healthy. Discontinue the mixture; take the alterative pill every third night; and the following purgative pill occasionally:

R. Pulv. alöes compos. ʒj.

Pulv. Jacobi, gr. v.

Saponis duri, gr. x.

Decoct. alöes comp. p. q. s. M.

Fiant pilulæ xx. quarum capiat ii. vel. iii. h. s. albo astrictâ.

Disliking exceedingly the sensation of the rollers, he may be allowed to discontinue them; but must regularly pursue the plan of sponging and friction in the morning. Having now to return to his work, may take half a pint of porter at dinner; but on no account to have animal food more than once a day, and that of the most digestible kind. Did this patient's station of life permit it, I should much prefer allowing him two or three glasses of good wine daily, rather than porter.

*Saturday, May 27.*—Convalescence most favourable. Tongue almost clean; appetite and spirits good; healthy strong pulse. Urine passed very freely, but the long acquired irritability of the bladder remains in a consi-

derable degree ; bowels open each day ; excretions not yet appearing quite healthy ; lameness almost removed ; some tenderness at the seat of the uric concretion at the side of the heel. In order to excite absorption of the uric matter, apply freely night and morning, by means of friction, the following lotion :

R,   Liquoris potassæ  
      Misturæ amygdalæ āā .ʒij,  
      Spir. rosmarin. ʒi.   M.—Fiat lotio.

To wear over the part, a soap plaster spread on soft leather. Continue each pill a fortnight, as before directed ; and then lay aside all medicine, except the occasional employment of the purgative pill. For several days past, he has taken a pint of porter or upwards. On no account to exceed a pint and a half in the day ; and to eat animal food once a day only. To guard very carefully against wet. To sponge the feet and ankles thoroughly every morning, in the manner described at p. 290\*, as a constant habit ; wiping them carefully dry ; using subsequent friction till a comfortable glow in the skin is produced ; and finishing the process with one foot, before the other is begun.

*July 4th.*—He assures me that he has pursued attentively all the regulations prescribed. He is now restored to good health. Tongue clean ; countenance clearer than I remember to have seen it ; appetite and digestion good, and alimentary secretions healthy ; spirits cheerful ; limbs much stronger than they have been for years ; the uric matter very much absorbed, and the parts where it was deposited almost free from tenderness.

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\* See also under the head of Prophylactic Regimen.

The morning urine of this day of amber colour, with a slight mucous cloud; specific gravity, 1.0172. Four ounces afforded, of phosphoric acid, 2.8 grains.

I now made a comparative experiment with reference to the proportions of urea and uric acid, and found that these principles were also, comparatively, in much smaller quantity than had been afforded by the urine voided during the paroxysm.

*June 1816.*—This patient has entirely escaped gout since the last report, notwithstanding he has been regularly employed as coachman, and consequently exposed to the changes of weather both by day and night. He has, also, during the whole period, enjoyed unusual health and spirits. An example of a habit more completely gouty could scarcely be selected. Under the disadvantages of exposure, which are attached to his situation in life, and of occasional inattention to regimen, it cannot be presumed that the gout will not return; but it is shewn, both that the treatment in his last violent paroxysm (similar in its degree to his former fits, which, neglected or slightly treated, always ran a course of twelve or fourteen weeks) was speedily successful; and that it has not, by shortening the disease, or by a quick removal of its most urgent symptoms, induced any disposition to a more early return; but quite the reverse, as the present date abundantly shews.

*June 1817.*—He makes at this period a very favourable report of the improved state of his constitution. In the course of the last winter and spring, he had two or three very slight attacks, in consequence of continued exposure to wet and cold, and living in a damp situation; but they proved tractable, and of short duration. He expresses himself now to feel in good health and spirits.



*September 19th, 1818.*—Has been free from gout since the last date, with the exception of one attack, which continued only a few days, and readily yielded to the former plan of treatment. Has also been free from gravel. He has carefully observed my instructions to regulate the bowels; to use the daily plan of washing the head; and, with as much regularity as in his power, the sponging of the feet with salt water. He has, at three or four different periods, taken the mixture (p. 297) once a day for about a week, with an alterative pill each other night. Hence, when every circumstance is considered, this must surely be regarded as a strong example, both of the controul obtained over the paroxysm itself, and of the success of prophylactic treatment.

*March 1823.*—In this long interval he has experienced only one severe attack, which he had not the opportunity of treating with sufficient promptness. With this exception, he has been affected only slightly, and not so often as once a year. His constitution is altogether materially improved.

## CASE II.

*April 1815.*—W. C. aged 38, a plumber and glazier, short in stature, has a circular chest, is thin, but, according to his statement, was formerly corpulent, both before and some time after he became gouty; of sallow complexion; of nervous temperament; has great sensibility of nerves, but is apparently of mild disposition; perspires easily on exertion; suffers much from the cold of the winter, and particularly in the feet; for two years past subject to copious hæmorrhoidal discharge; and says, that if this occur when the paroxysm of gout is present,

he experiences from it immediate and very considerable relief; previously to the flux, has local heat, weight, and fulness; habitual state of bowels costive, since he has been gouty; before this, they were regular. Has pursued his trade in London nineteen years. Has always drunk porter and gin daily, and formerly in excess; also, till of late, that he has been debilitated, has eaten animal food. Not subject to other diseases. Gout unknown in his family. He was first attacked nine years ago, at the latter part of spring, when the weather was hot, in the great toe of one foot only. The fit continued ten days. The second attack was at Christmas following; first in the same part as before; next, on its subsiding there, in the great toe of the other foot. This fit continued three weeks. In subsequent attacks, the knees and hands have been severely affected. Exposure to cold the most common exciting cause. The time of the invasion of a paroxysm generally about twelve or one in the morning; sometimes, when having gone to bed with the usual feelings of good health. When he has had precursory symptoms, they are the following: unusual fulness of the veins; prickings at the end of the fingers, if the hands be threatened with the disease; but if the feet, flying pains in them; feels getting lame; restless at night, with little and unrefreshing sleep; depressed spirits; loss of appetite; suffers cramps also severely, at the side of the hand, and in the fingers themselves, if the hand be about to become the seat of gout; in the calf of the leg, if the foot; commonly has rigors on the invasion of the fit, and sometimes afterwards, very irregularly; always suffers most pain in the night; most in an old part again affected. In some fits, the pain has continued a fortnight with little intermission, even in the day; the



longest duration of a fit, eight weeks; the shortest, ten days; the longest interval, fourteen months; the shortest, three weeks or a month.

The present paroxysm began on Monday, April 3d. I saw him first on the 15th. He relates that he was exposed for several hours on the Monday, to a cold wind and rain, in cleaning windows; went to bed, however, without complaint; was awake between one and two in the morning with pain in the middle finger of the right hand, which rapidly inflamed and swelled. The whole hand was also soon affected. Gout continued in these parts for eight days; then seized the left hand; first in the middle joint of the fore finger, and subsequently in the metacarpal joint of the same finger, the inflammation spreading also to the back of the hand. Describes his pain as most excruciating, and sometimes to the degree of producing delirium. To use his own language, "he screams from agony; the affected parts feel as if in the hottest fire; sweat issues from the ends of the fingers in the pain; often feels as if dogs were gnawing the flesh from the bones; violent throbbing; sometimes it seems as if pins and needles had been forced in under the nails, and were again forcibly drawn out of the flesh; heavy as if a ton weight were hung to the foot." He says that this last sensation, though very strong in the hand, when it is the seat of complaint, is still more violent in the foot; does not speak of the tightness which is so often complained of in gout.

At present (15th), the wrist and back of the left hand, and middle and metacarpal joint of the same, are the most affected parts. An abscess has formed over the middle joint of the finger externally. Part of the skin covering the matter, is black from effused venous blood;



part exhibits the appearance of white chalk-like spots. The abscess was opened, and a considerable quantity of white curdy puss was discharged\*.

The inflamed parts are vividly red†; the back of the hand pits much on pressure; the adjacent veins, and particularly those in the line of the inflammation, are in the fullest state of distension. The great toe of each foot is much enlarged from the swollen bursæ; the skin faintly red, and there is much bursal distension of the external part of each ankle; suffers great uneasiness in walking, from the weakness of the ankle joints; and particularly on uneven ground, either foot sometimes turning suddenly with severe pain.

Pulse 104, full, and rather throbbing; irritable, with an unequal beat; tongue moist, and not very foul. Some days ago vomited sour mucous matter, of a greenish yellow colour; is liable to this in the gout. Has some tenderness in the right hypochondrium on pressure, but none at the epigastric region; not costive; has a foul state of bowels, much slimy, clay-coloured discharge from them; the bladder very irritable, urine being passed frequently, and of a deep orange colour, but without any sediment, except a slight mucous cloud. That of the morning was found to possess the following properties: Its specific gravity 1.014; it reddened litmus in the usual degree; was rendered slightly milky by heat; and on cooling deposited an albuminous precipitation, appearing in whitish coalescing flakes. Four ounces afforded of phosphoric acid 1.02 gr. (see Experiment v. p. 129). In the treatment of the case, the pills of calomel, colocynth, &c. and containing of calomel three

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\* See Appendix to the Case.

† See Exp. p. 159.

grains, with two of James's powder, were directed immediately; the draught (p. 198) containing magnes. sulph. 3iss. acet. colch. 3j. &c. every six hours; the evaporating lotion constantly to the inflamed parts; and a bread poultice to the seat of abscess. The diet, gruel, tea, and bread.

16th.—Much better. Has taken the pills and three doses of the draught, without nausea; two copious evacuations, foul and dark, watery and hot. Urine much more abundant, and passed with less frequency and irritation than yesterday; its specific gravity 1.0105; affected as yesterday by heat. Pulse 84, with diminished irritability; has passed a good night, sleeping comfortably from ten to six without the assistance of an opiate. Previously, his nights have been sleepless, painful, and most distressing. Found great relief from the poultice, and assures me that the lotion gave ease to the inflamed parts in an hour. The appearance of the knuckle affected with abscess much improved; skin now of pale red; œdema lessened; finger less swollen, and can bend it a little. Still much tremor of muscles; often has palpitation, and is indeed altogether in a very nervous state. Continue all the treatment; add light broth and bread to the diet.

17th.—Feels much amendment. Had rigors yesterday afternoon, with a sensation of cold water down the back, not followed by heat of skin; still has tremors; complains of thirst and want of appetite; pulse 72, more equal and natural; tongue moist, but furred. Gout exceedingly relieved in the parts yesterday affected. The little finger of the same hand has inflamed suddenly within the last two hours; the skin is vividly red, burns and throbs. No further apparent secretion in the seat of abscess. The skin appears as if inflamed from a scald; some



vivid redness remains. He mentions that three days ago he observed a red line beginning from the abscess, and passing round the elbow up to the shoulder, with much tenderness in the whole course. Was rather faint and weak on rising this morning. Has not passed urine so abundantly in the last, as in the preceding twenty-four hours, but with ease and freedom. It was affected as before by heat, and I now observed that it became turbid at 180°. The draught has acted freely four times; the stools hot and watery, and without griping: yesterday they were almost black; this day rather light. Repeat the pills, and all the other remedies.

18th.—Much improved. Has passed a good night; pulse natural; scarcely any redness remaining in any part; can move the finger having the abscess, without pain; its appearance improved; it bears some pressure; the swelling of the hand almost removed; expresses great satisfaction from the lotion. Free from rigors; appetite returns. The bowels have continued to be much affected; the discharges becoming natural. The urine still flaky from heat, but in a less degree. Continue the draught twice a day, and take five grains of the compound calomel pill each other night. Dress the sore with simple dressing. To increase the diet gradually, but to observe a correct regimen. To sponge the limbs and use subsequent friction, on the plan before mentioned, every morning.

*June 20th.*—He reports that he continued the medicine above a week. He rapidly recovered after the last report, and has remained well; feeling better, he assures me, than for two or three years past. This morning's urine possesses every healthy character, and is not affected by heat, or nitric acid. Its specific gravity 1.0137. Four ounces afforded, of phosphoric acid .91 gr. (See



Exp. vi. p. 120). A small speck of uric concretion appears under the skin; but the part is free from tenderness, and the use of the finger is perfect.

In addition to the injunction of a careful regimen, and the morning practice of sponging and friction, he is desired to regulate his bowels by means of pills, containing pulv. aloes comp. pilul. hydrarg. gum. gambog. and sapon. dur. prescribed in suitable proportions.

*Appendix of the Chemical Examination of the Matter from the Abscess.*

Having collected a sufficient portion of this curdy pus, and exposed it to dry spontaneously, I submitted it to chemical examination\* with the following results:

This matter, exhibiting the appearance of *chalk-like* particles intermixed with pus, seems to be a mixture of albumen and urate of soda. Before the blow-pipe it decrepitates slightly like albumen, emitting an ammoniacal odour, and burning with flame. When urged by increased heat, the white residue fuses like carbonated alkali, and, like it, has a powerful effect on turmeric paper. The residue, exposed to the influence of a damp atmosphere, did not deliquesce; whence it may be concluded, that the alkali was soda.

Like urate of soda, on being treated in the usual manner with nitric acid, it exhibited distinctly the rose hue.

*March 1816.*—This patient has continued perfectly

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\* My friend, Dr. John Davy, was present, and obligingly joined in the experiments.

free from gout, and has not experienced any interruption of good health. He has, however, lately relapsed into irregularity of habits; and consequently his future security will be very precarious.

*June 1817.*—No opportunity of discovering his present place of abode; nor of learning his subsequent history.

### CASE III.

J. W. aged 43; of small stature, chest circular; thin; of nervous temperament; of active habits, walking much daily; has habitually drunk porter, and spirits, but he says never in excess, and eats moderately. His mother was severely gouty, and died at the age of 46; he says, from the gout. He is not subject to other diseases. Was first attacked at the age of twenty-eight in one great toe only, from continued exposure to cold on a snowy night. This fit was of short duration. Second attack in seven months after, and in the same part only. The third fit, about July in the succeeding year, affected the following parts in succession: the great toe of the same foot as before, each hand, one elbow. Continued to have gout annually, and often twice in the year; and in one year, after the free use of the eau medicinale, four times in the year. This medicine gave him present ease; but he felt, long afterwards, extremely nervous, and local weakness in a greater degree than he had ever before experienced. His bowels were left costive, and his skin appeared yellow and sallow for many months. Some of his fits have lasted twelve or fourteen weeks. One attack, a year since, affected various parts in the following order; right foot, right elbow, right hand, left elbow, left hand, left

foot, and also both knees. The diaphragm was frequently affected with spasm. His most remarkable premonitory symptoms are, cramps in the muscles of the lower limbs, affecting him severely as he is getting his first sleep, for several days before the attack; and sometimes for a week before, he has much scalding of water and sense of strangury. Also is dyspeptic, with great depression of spirits. The present fit (Dec. 1813) in which I saw him, was excited by cold and wet from walking in thin shoes on snowy ground. As is usual to him, he was attacked soon after midnight. The fit began three days before my visit, which was in the evening. I found the gouty inflammation just abating in one foot; and attacking one hand, which was inflamed and swollen, and in exquisite torture. His bowels were costive, and his urine deposited much pink sediment. I filtered it, and found that it coagulated with considerable firmness from heat at  $180^{\circ}$ ; and gave a very dense whitish precipitate with nitric acid\*. I prescribed the purgative pills and draught already mentioned in the two preced-

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\* Dr. Wells observes (Trans. of a Society for the Improvement of Medical and Chirurgical Knowledge, p. 208), "I never, but in two instances, saw a pink coloured sediment in urine which contained the least quantity of serum." In addition to the phenomenon in my present cases, I have met with it in a female who had ascites. The pink sediment was considerable, and the urine was strongly affected, both by heat and nitric acid.

The *precipitation* which is produced by nitric acid, or other re-agents, is commonly but very improperly expressed, as that of *coagulation*; a term which relates only to the agency of heat. The error in question was first pointed out by Dr. Bostock, in his interesting paper on the "Nature and Analysis of Animal Fluids."—Medical and Chirurg. Trans. vol. iv. p. 56.



ing cases, and the use of the lotion. This patient lived at a considerable distance in the country, and I did not see him again; but in a few days after I received a circumstantial account of his progress. The bowels were freely purged in three hours, and he was immediately relieved, so that comfortable sleep followed. The *fæces* were dark and slimy. The lotion proved very comfortable, and assisted much in giving ease. He has not required opium. The draught has been continued regularly, twice or thrice a day, with much purgative and diuretic effect. The urine still deposits pink sediment, and is in a slight degree affected by heat and nitric acid. A week after, the report was quite satisfactory. Appetite, sleep, and spirits returned; *fæces* of healthy appearance; the urine clear, and no longer affected by heat or acid. From the severity of this attack, he believes, from former experience, that, without assistance, it would have continued two or three months, and attacked various parts. From his long fits he has always experienced much constitutional and local debility for many weeks after their going off. Now his strength and energies return daily.

The only circumstance on which I shall further remark in this case, is the albuminous state of the urine, which was more remarkable than in the preceding case. This phenomenon has been more particularly presented to our attention than before, by Dr. Blackall, in his valuable publication on Dropsy\*. In thirty gouty cases,

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\* Dr. Wells, in the paper to which I have already referred, read to the Society, June 1811, has considered the subject of serous urine in a truly elaborate manner, and has presented an extensive series of examples.—Mr. Cruickshank, in the second

in which I have examined the urine with a view to this circumstance, I have found it albuminous in seven. I now offer the following additional examples :

#### CASE IV.

J. M. a strong man ; of sanguineo-nervous temperament ; has gout at present in the feet, but the paroxysm is abating ; slight œdematous swelling remaining ; pulse natural ; nerves irritable ; tongue furred ; bowels constive ; urine not abundant ; of specific gravity 1·0196 ; of orange colour, depositing much pink sediment ; filtered and heated, it became flaky ; and, with nitric acid, it afforded a copious flaky precipitate. Two doses of the pills, with calomel, colocynth, &c. and the daily employment of the draught, p. 198, soon restored the health of the patient ; and even in a few days, the urine, when examined, was found to possess every healthy character.

#### CASE V.

E. L. of middle age, and originally of strong constitution ; of nervous temperament : has lately had a severe paroxysm of gout, in both feet and one knee. The feet are very œdematous ; the skin is pale. The pulse is rather weak ; he is extremely nervous, and complains of

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edition of Dr. Rollo's Treatise on Diabetes, in 1798, appears to have been the first author who gave notice of the phenomenon in question.

much lassitude. Occasional spasms affect both the upper and lower limbs. His urine is clear and light, with only mucous sediment. I had not the opportunity of ascertaining its specific gravity. It coagulated with considerable firmness near the boiling temperature, and gave a dense precipitate with nitric acid. This patient was soon restored to health by a steel tonic, an invigorating diet, and by the local plan of friction with a stimulating liniment, and the use of circular rollers. The urine, examined at the expiration of a week, from the beginning of the treatment, was perfectly healthy.

### CASE VI.

T. W. aged 64; of sanguineo-nervous temperament; frequently dyspeptic, and subject to bilious obstruction. A *martyr* to gout. He has numerous uric concretions both in hands and feet. No part of his family has had gout, except an aunt, who suffered from it severely. I first examined his urine under a paroxysm of gout, before any oedematous swelling had taken place, and found it albuminous in a great degree. Its specific gravity was 1.0141. It became turbid at 120°, and, as the temperature advanced, formed heavy flakes. It afforded a dense precipitate with nitric acid. This urine contained a very small proportion of saline matter, yielding from four ounces, by means of nitrate of lead, not more than 4.6 grains of precipitate. It possessed slight traces only of urea or uric acid.

At the patient's restoration to his usual state of health, I was much surprised to find similar characters of urine remaining. At several distant periods up to the present time (January 1819), when he has been in his best health,



and when his appetite and digestion, though never entirely correct, have appeared to be very near the standard of health, I have examined his urine. It has always been secreted in abundant quantity, and I have, without one exception, found it more or less strongly affected, as described, by heat and nitric acid. Its specific gravity in these trials has varied from 1.0041 to 1.0676. These specimens of urine have scarcely afforded the least traces of urea\* or uric acid, and a very small proportion only of phosphoric acid; but it is worthy of observation, that of each of these principles, the gouty specimen afforded comparatively the strongest evidence, though still only slight. On each occasion the urine reddened litmus.

At my request, Dr. Prout obligingly examined a portion of this patient's urine, when he was least complaining of indisposition. The following is his statement of the results: "I found the specific gravity of this urine at a temperature of 45° to be 1.0014. It coagulated at a temperature of about 130°, which is considerably below the coagulating point of albumen. I could not satisfy myself so well as I could wish of the existence of uric acid, though I believe it contained a small quantity. It contained also some urea, but less than natural. After having been kept some days in the bottle, it acquired the smell of sour whey, and very strongly reddened litmus; evidently from the developement of acetic acid. The animal matter present differed somewhat

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\* Oxalic acid was used in the examination of this urine for urea, as also the nitric. It is a more delicate test of this principle, although acting more slowly, than the nitric acid. For this fact I am indebted to Dr. Prout.

from albumen, and approached in its properties to curd, though it is evidently a distinct substance from either." It seems to me probable, that the peculiarities of this patient's urine are connected with the extensive secretion of uric acid, which is continually going on in the hands and feet. He has several ulcerations, from which the inspissated discharge has furnished me with white concretion; and this, treated with nitric acid, has produced the rose hue.

In my present digression, I purpose briefly to consider the pathological character of a serous state of the urine. Dr. Blackall conceives, that an inflammatory disposition of vessels, "prevails in those cases principally, in which the urine is coagulable." In this observation, the reference of the author is made to dropsies alone. Not intending to discuss the accuracy of this opinion, or to animadvert on his practical statements, which are numerous and highly instructive, I shall offer only a few remarks further in connexion with this subject.

This anomalous function of the kidney has appeared to me sometimes associated with nervous irritability, and general weakness, rather than with an inflammatory state of the circulation. I examined the urine of a gentleman under inflammatory excitement from mercury, and its transparency was perfect at the boiling temperature. Some time after, when debility only was present, it coagulated very considerably from heat.

Both in *dropsical* and other urine which I have found to be more or less albuminous, the kidney has seemed to be sustaining an irritable and hurried action; the patient, in most cases, passing urine with considerable frequency and irritation, and in some of the examples very abundantly. It must not, however, be understood, that I



intend by this observation to ascribe this peculiarity simply to *nervous* disturbance. As a general position, I believe it may with truth be contended, that most of the morbid actions of the kidney, which we find, are derived from some error in the functions of the digestive organs; and hence, probably, the source also of the present anomaly. In eight examples of albuminous urine, procured from patients not dropsical, I have found, by careful examination, a remarkable deficiency of urea and uric acid, and also of the usual saline principles. Thus it appears that the secreting action of the kidney, under these circumstances, is very imperfectly performed; and I conceive, that, in proportion as the urine bears the characters in question in the greatest degree, it is not so much the product of regular secretion, as of *percolation*. As I have above noticed, we do not meet with the usual principles which distinguish the regular secretion of this important fluid. The probability may therefore be further suggested, that urine, which by examination affords the evidence of being serous in a slight degree, does not contain much true albumen; but that this albuminous principle is in such instances chiefly a modification of the animal matter, which the kidney, at all times, secretes from the blood; and is not, therefore, necessarily to be regarded as an extraordinary drain of serum from the circulation; which, by the common theory on the subject, it might be considered.

Proceeding, however, upon the supposition, that urine which is affected by heat and acid, as I have described, is always containing a portion of the serum of the blood, it becomes an important desideratum, to possess the means of forming, with some facility, a presumptive calculation of the quantity which it bears to the urine in any given measure, and to rate the consequent estimate of what may



be discharged in the twenty-four hours. Dr. Wells, by inference from comparative experiments, adopted as a criterion the apparent degree of coagulation, which the urine presented from the application of heat. I have repeated the processes which that author has detailed (in the volume before mentioned, p. 224), but I could not arrive at any satisfactory results.

The test of nitric acid, employed as I shall now describe, appears to me a process at once simple and instructive. I found that one part of serum diluted with five hundred parts either of urine or water, instantly yields to nitric acid a slight precipitate, perfectly white. Diluted even with seven hundred parts, after some time, a sensible precipitate is afforded; and this is the *maximum* of the power of the test. The *immediate* result, however, produced from the first mentioned proportions, is the most convenient evidence. Accordingly, therefore, as the urine under examination will suffer dilution with distilled water, and continue to furnish an *immediate* sensible precipitate with nitric acid, is the proportion of serum to be estimated, as so much *exceeding* 1 to 500. For example, urine which exhibits this effect, after dilution with four parts of water, may be considered as containing 100th of serum, or rather of albumen. The nitric acid should be added in about the proportion of a 6th, as albumen is soluble in very dilute acids; and without this precaution, the method which I propose will not succeed. I ascertained that the power of nitric acid as a test, was superior to that of heat, which renders the fluid (urine or water) faintly milkish, when the proportion of serum is 1 to 600; but when extended as 1 to 700, does not impair its transparency. Nitric acid produced as much effect on the proportion of 1 to 500, as *muriatic acid* did on that of 1 to 100. The specific gra-

vity of the serum which I employed in these experiments, was, at 60°, 1·0285.

In the further cases which I shall relate in a condensed form of detail, I purpose to hold in view some different particulars in every communication; and begin with offering an account of some examples, in which a relapse shortly followed the recovery from a paroxysm; and of quick returns of the paroxysm in other instances; in consequence of causes admitting of clear explanation, and affording some instructive lessons both to the practitioner and the patient.

## CASE VII.

J. L. aged 46, a mechanic; has a circular chest, and is corpulent; of sanguineo-nervous temperament; rather plethoric; irritable in disposition; often dyspeptic and subject to hæmorrhoidal discharge; habits of living sometimes free, and formerly excessive. Neither father nor mother had gout, but his grandmother on his father's side was afflicted with the disease. This patient was first attacked at the age of thirty-five, in the toe of each foot in succession. The ankles, knees, hands, and elbows, have been affected in subsequent fits. The disease has gradually increased, both in severity and the frequency of its recurrence.

I visited him first in March 1815. He had been suffering a severe fit, five weeks, and had still active inflammation in the right ankle, right hand, and right elbow. Other parts had been previously affected. He had chiefly employed sudorific medicines, rather a supporting diet, and flannel covering to the parts. His tongue was furred; his pulse irritable; the skin relaxed;



countenance sallow ; urine of natural colour, but depositing pink and mucous sediment ; the bowels confined, and the fæces blackish and slimy ; the nervous system extremely irritable. On most nights his gout was severely painful. I adopted the mode of treatment mentioned in the former cases, purging him twice with pills as described at p. 297, and with daily doses of the draught, p. 198 ; at night tranquillizing him with the pill p. 240. The lotion afforded its auxiliary benefits most satisfactorily. At the end of a week, he was convalescent, and I discontinued my attendance, enjoining a strict attention to diet, care against exposure, &c. and prescribing as internal medicines a mild alterative course of *Plummer's pill*, and a daily bitter aperient ; with the use of bandage, liniment, and friction to the weak parts.

Flattered with his rapid amendment, he too soon and too far presumed upon it. He had neglected the methodical treatment which I had prescribed, and carelessly exposed himself to a cold east wind with wet.

In May, I found him again suffering in both feet and one knee ; and, together with pain and nervous depression, the stomach was deranged, and the secretions were very unhealthy, indicating, in concurrence with a *lead*en complexion, and some hypochondriac tenderness, that the liver was much deranged in its functions. No alteration of structure was discoverable. The first-mentioned treatment being repeated, he soon again became convalescent ; and I now arranged a strict plan which I should superintend. The alterative employment of mercury with the bitter aperient, p. 286, and regulated diet and exercise, were pursued until the secreting functions became healthy, and the complexion also indicated the constitutional improvement. Finally, I directed that he should, carefully, at all times, regulate his bowels by the pills,



p. 303; take from two to four glasses of sherry, or old port, daily, accordingly as fatigue might require it; avoid malt liquor, and take animal food once a day only; and every morning pursue the plan of sponging and friction of the limbs, with strict attention.

He has found full advantage from these means. The present period, April 1816, is already a longer interval from gout, than he has enjoyed for a few years past; and his general state of health, together with the improved vigour of his limbs, afford us complete satisfaction.

In this case we see it exemplified, that an unhealthy state of the digestive organs, and particularly of the functions of the liver, may be the foundation of a severe relapse. An exposure to cold, which in a state of truly recovered health he might have borne with impunity, again excited the gout.

The obvious inference presents itself, that the physician should never pronounce his patient really cured of the fit, or secure from its early accidental return, until the digestive functions, in the comprehensive extent of the expression, are permanently restored to health.

### CASE VIII.

D. S. aged 38; has a circular chest; is tall, robust and corpulent; of a nervo-sanguineous temperament; very plethoric; has been of indulgent habits, drinking wine and other liquors indiscriminately. Father had gout severely: first attacked at the age of thirty-four, in the knee, in the month of June; he thought it was a strain. In the autumn of the same year he suffered another fit, the ball of the toe in the same limb being the

part affected. From this period to the date at which I saw him, his gout returned frequently, and with increased severity. Each knee and foot became affected. I visited him first in December 1814. Severe gout was in the feet. He had been much distressed with cramps, and stated that these commonly occurred in the legs, after much exertion in walking or dancing, or from wearing thin stockings, or standing in slight shoes on a damp ground, or exposure to a cold night air. From the same causes he suffered occasional spasms at the stomach. *Punch* was a liquor that did not sensibly disagree with his stomach; but he accused it of sometimes exciting a fit. In some of his former attacks he had taken hellebore and laudanum regularly, and purgative doses of calomel occasionally. From this treatment he procured ease in the affected parts, and shortened the paroxysms; but sometimes he suffered much inflammatory heat of stomach from the hellebore; and, as I have related, the gout recurred quickly.

On the present occasion he had much visceral derangement; the tongue was furred; the bowels were inert without medicine; and such discharges as had been procured, were foul and highly bilious; the urine was of deep colour, and with much pink sediment. I adopted my usual treatment with speedy success; and took leave of him with many injunctions of caution and forbearance. In February 1815, after exposure to cold without a great coat, he became chilly, with subsequent heat of skin and head-ache: and the throat became slightly sore. Gout in one foot soon followed, but not with its usual severity; yet the other foot did not escape. The former general and local treatment was repeated. I saw him first on the 6th, the second day of his attack; and on the 16th he

felt perfectly recovered. During this period of my attendance, I found that his secretions had not become permanently healthy in the interval of the two fits. I now, therefore, pursued the usual plan of corrective tonic remedies, till this result was obtained; and pointed out a strict prophylactic regimen, as essential to his permanent cure.

At the present date, April 1816, he informs me, that he has escaped gout and all complaints. He has duly regulated his bowels with the pills, p. 303; and, on being occasionally heated from accidental circumstances, has also taken a portion of a solution of sulphate of magnesia in mint water. He has practised the morning sponging and friction with considerable regularity; and ascribes to this method much improvement in the power of the limbs, and a diminished susceptibility to the impressions of variable atmosphere.

In this example of youth and robustness, an abstemious course of life and vigorous exercise should be steadily continued, in order to counteract successfully a fulness of habit, and secure an exemption from gout.

### CASE IX.

J. S. aged 43; has a circular chest; is tall, robust, and corpulent, and very plethoric; of nervo-sanguineous temperament; confined habit of bowels; has hæmorrhoids, and occasionally gravel; perspires freely on much exertion; has been a free liver, and indulged in meat suppers, in the use of porter, wine, and other liquors. His exercise has been irregular. Has lived in London seven years, and his gout has been more frequent and severe since he



quitted the country\*. He has suffered much from dyspepsia. His father had gout. This patient was first attacked at the age of twenty-eight, in the ball of the toe of one foot; but since, scarcely any part either in the upper or lower limbs has escaped. Twelve months have made the longest interval of exemption from a fit; and four the shortest. The longest duration appears to have been ten weeks; the shortest, five or six days. He has often been warned of an attack by symptoms of severe dyspepsia, a very inert state of bowels, high-coloured and scanty urine, depression of spirits, a numbness of the parts about to be affected; and just at the invasion of the fit, he suffers severely from cramps.

The fit in which I first saw him, in February 1815, had already existed for seven weeks, and was still severe, and affecting various parts. Wet and cold had been the exciting cause; and different situations had been seized in the following order;—left elbow; left knee; right shoulder, right elbow, and right hand. He was entirely in a helpless state; and suffered, each night, pain and fever, cramps and violent startings. He had employed continual means, both by medicine and warmth, to produce sweating; but with no marked good effect, and with obvious increase of weakness and irritability of his limbs, attended with general languor. The skin of the hand had almost a *scalded* appearance, and the fingers

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\* The increased frequency of the disease in this patient must not, however, be ascribed to this circumstance alone; but rather to the continuance, or probable increase, of improper habits, co-operating with the loss of country air; and, added to such causes, there is to be considered the sure tendency of gout to increase in the constitution, when unrestrained by true *prophylactic* care.

exhibited the character of paralytic weakness. The secretions were in the most vitiated state. The tongue was foul; the urine scanty and much loaded with mucous and pink sediment; and the fæces were slimy and bilious. His nervous irritation and depression of spirits could not be exceeded. The successful treatment of a case so long neglected, aggravated by much internal derangement, and attended by morbid sympathies established by repetition, became a matter of great difficulty. To the parts yet inflamed and tender, the lotion was applied with the utmost advantage. Five grains of the compound calomel pill were directed each other night; and the usual pills of opium, p. 240, to be taken as pain or restlessness should require. The bowels were freely acted upon by the draught, p. 198, repeated three times a day; and the diet, which had hitherto been too supporting, was now simply diluent. So early as the 8th of February, he appeared convalescent, and an improvement of diet was admissible. The urine had assumed a healthy appearance, but the bowels were not yet in a correct state. The alterative pill was continued; a draught of infused rhubarb and columbo with the addition of magnesia and compound cardamom tincture, was substituted for the former medicine. The weak and oedematous limbs were rubbed with linim. camph. compos. and linim. saponis compos. in equal proportions; the usual plan of sponging and active friction was observed; and, also, rollers were applied.

On the 14th and 15th, he took carriage exercise. At my visit on the 16th, I found that he had ventured in the air, the wind being in a cold quarter, with too little caution, and he was beginning to feel its ill effects. On the 17th he complained that his night had been restless and painful. One knee and one foot were rather inflamed,



and all the parts affected in the foot were tormented with shooting pains. The nervous system was exquisitely sensible, and his mind was depressed with all the horrors of returning suffering. The first treatment, both general and local, was repeated; but more frequent doses than before of the opium pill became necessary to tranquillize pain and irritation; although the total quantity of this medicine was not much increased.

At this time, the pink sediment in the urine was again abundant, and the alimentary secretions bore an unhealthy aspect. Very light diet only was allowed, and the medicines were continued. In a few days the pink sediment in the urine was changed to one of whitish colour; and this I found, on trial, to consist chiefly of phosphate of lime with mucus, a little animal matter, and about a fourth of uric acid. The urine itself reddened litmus paper. The state of the bowels gradually improved.

On the 28th he was a second time convalescent; and appropriate treatment, in reference to the favourable change of circumstances, was renewed. The unhealthy state of bilious secretion still demanded attention; and with a view to this point, and the improvement of the whole digestive functions, the alterative calomel pill was directed every third night, and the columbo mixture, with cascarilla and rhubarb, p. 286, twice daily. The local management described on the 8th, was again adopted; but the liniment, p. 291, was now used; the parts so often affected, being extremely debilitated and requiring artificial excitement. I desired that he should take animal food of light digestion once a day, with any vegetable in season; avoid malt liquor and spirits; and drink, after his dinner-meal, a few glasses of old sherry.

These means were pursued with advantage; and the



general health being restored, he was directed to regulate the bowels with pills according to the formula p. 303, and to be strictly careful in regimen. The limbs still suffered from much weakness, which had been implanted in them by long neglect. Upon uneven ground the feet would turn suddenly\*, with excessive pain, and he scarcely escaped immediately falling. At night the ankles became œdematous, and affected with much aching; and cramps were not yet absent. Twelve months elapsed before I had the opportunity of seeing this patient again; and I had the pleasure to find that he had continued quite free from gout; but his limbs were not wholly recovered. It is true that he had not patiently persevered in friction and other treatment; and I enjoined, therefore, an employment of the means before mentioned, to be pursued with due attention; *tinctura lyttæ* being still added to the liniment.

Soon after this period, I found him gradually recovering the strength and ease of his limbs in the most favourable manner, with every prospect of a perfect cure.

## CASE X.

The following case, exhibiting a most striking example of acquired gouty diathesis, appears to me peculiarly interesting in the many instructive views which it affords.

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\* He mentioned, "that on first rising in the morning, his right knee would feel as if slipping out of the socket; snapping also, with some degree of pain." Lately, on getting into a carriage, he inadvertently bore his weight for an instant on that limb, and suffered much consequent pain and inconvenience.

It points out the disposition of this disease to increase its severe holds in the constitution, when indulged in its own course according to the doctrines of Sydenham; it exhibits the power of regular treatment; and at the same time affords a strong warning as to the care required on the close of the paroxysm, however favourable the circumstances of the convalescence may be.

B. M. aged 41; of middle height, circular chest, muscular, and of late years disposed to corpulence; of nervo-sanguineous temperament, and of strong constitution. Not subject to other diseases. Gout unknown in his family. His habits of life for many years free, and without any attention to regimen. Exercise irregular, but strong and violent, particularly on horseback. Was formerly much subject to violent bleeding of the nose. His first attack of gout at 30, in the great toe of one foot only. Thought it was a strain. For the first five years had not either frequent or severe returns. During the last five years, the greatest interval from a fit has been eight months; the shortest, two. Has not noticed any distinct premonitory symptoms to precede his attacks; but has found himself previously getting corpulent, and particularly in the abdomen; and during the summer months to have acquired a very sensible fulness of habit.

For the last three years, the most violent paroxysms have taken place in November or December, and continued, with only occasional intermissions of suffering, till March. In some of his fits, he trusted to nursing alone, with the most simple expedients for the regulation of the bowels; being taught to believe that the course of the gout should, in regard to the safety of the constitution, be encouraged, and on no account be disturbed. In other fits, however, like gouty patients in general, who are so much prone to extremes in doing too little or too



much, he resorted occasionally to irregular and rash methods.

In the fifth year of the gout, the feet being highly inflamed and painful, he immersed them in cold water, and by its continued use for half an hour at a time, and repeatedly in the course of the night, the symptoms were very much abated. In the night the stomach was affected with spasms; but with respect to the limbs, they were so much improved by the next morning, that he was able to leave his bed and walk. Much internal derangement soon succeeded, continuing throughout the remainder of the year; and the stomach and bowels became in a serious degree subject to flatulent distension, to pain, and the sensations of spasm.

Since that time the paroxysms have been more frequent and violent. In the year 1814 the attack began in the first week of December, after very severe exercise and irregular living during the two preceding months. On the day previously, had been in very strong exercise in hunting, and did not use the precaution of changing his clothes, although very wet. In this fit, suffered much from general fever and irritation, with excessive local pain. The feet, knees, and elbows, were affected in succession. Profuse perspiration, and much head-ache. Common aperients, and laudanum, constituted the only means of treatment. Did not recover till the warm weather. In the spring, and through the whole summer, took a table spoonful of cream of tartar in a tumbler glass of warm water; but notwithstanding this constant attention to the bowels, and considerably more care in the habits of living both as to diet and exercise, a violent fit ensued in the following year. Passed the summer, as usual, well, until September, when he had a slight return of gout in one foot, and was again severely attacked in



November; so unfriendly was the disposition of a severe fit to prevent an early return. On the quitting of every paroxysm, he was severely affected with spasms mostly seizing the knee, but also he suffered from them in the feet.

In this attack in November, the symptoms became more than ever severe and untractable. He took laudanum, and also the black drop, in very large doses, with only slight relief. He procured frequent and excessive perspirations without the smallest permanent good effect. To the knee, when affected with deep-seated pain, he applied a liniment, by means of strong friction, of sulphuric acid and oil of olives, and vesicated the skin. The parts were much relieved; but in a few days afterwards (not considered as the result of this application) the stomach and bowels became severely and dangerously affected with vomiting and obstruction, and much spasm. These symptoms soon yielded to medicines. In the following week, however, the muscles of the chest, and the collar bone, were seized with excruciating pain. Violent vomiting came on, lasting two days. Then some interval of ease. But in the following week, a painful diarrhoea commenced on the Saturday, and continued until Wednesday, producing excessive weakness. From this time his recovery was progressive, but his debility very considerable. Came to London in the middle of February 1816, and in the first week of March was attacked with much pain in the chest, collar bone, and shoulders. Very soon the feet and ankles were inflamed and severely painful. Afterwards, the knees and elbows suffered equally. Purgatives, and some stomachic medicines, were taken during this attack. No return of internal complaint. The paroxysm was in every respect much milder than the preceding one of November. Recovery very slow. In the summer, found himself in good

health. Took regularly every morning through the whole summer a tea-spoonful and a half of calcined magnesia, which acted well on his bowels, and he thought it was affording him a cure.

Such then was the determined character of the disease in this case, and in a constitution irritable in the highest degree. It was scarcely possible to have an example of more difficult and intractable complaint.

I saw this gentleman first in October 1816. He was soon afterwards severely attacked; the fit returning a month sooner than in any former year. On the first day, in the left ankle; on the following, in the right foot; on the third day, in the right foot; in three days afterwards, in the left foot with great violence. I adopted my usual methods of treatment with immediate success. The continuance of the symptoms in each part did not exceed two days, although the hand was seized more violently than on any former occasion. He used the lotion unremittingly. The internal parts were not in the smallest degree affected with spasm or pain. Almost in the first week he began to think himself convalescent. This promising amendment was now sadly interrupted. Eager to get abroad, he exposed himself a little to the atmosphere. He threw off a blanket from his covering at night, and on the very morning of taking a mercurial purgative, on one of the coldest days in November, went into the drawing room very slightly clothed. In the most sudden manner, the stomach, bowels, and kidneys, were affected with intense pain and spasm, and with the utmost rapidity of symptoms. The pulse was low, and the attack was evidently spasmodic. It yielded to external fomentations, and to purgatives and antispasmodics. He soon recovered from all these serious inconveniences; but while pursuing a plan of alterative medicine, and of



course on all accounts highly susceptible, again exposed himself towards evening to the most unfavourable state of atmosphere, a heavy fog with a piercing north-east wind. A severe relapse of gout consequently took place, which became very tedious; and my attendance, which before had been interrupted, was now regular. The severity of the symptoms was successfully controuled by the treatment; and ease and sleep were procured under those intense sufferings, which on former occasions had failed to receive relief from three or four hundred drops of laudanum, administered in short intervals of time. In no case did I ever witness such constant and excessive deposition of pink sediment, or so completely vitiated a state of the alimentary secretions. That the deep foundation of this case of gout existed in a disease of the liver, was verified by the following indications:—a pain in the right hypochondrium, increased by depressing the ribs by strong pressure; by the symptoms already mentioned; by a complexion considerably jaundiced; and by a tongue always furred. The appetite, however, was scarcely ever interrupted. It would be tedious to detail the exact progress of the case. I treated the disease on the usual principles of conducting the cure of an unhealthy liver, having more than ordinary regard to caution in the use of mercury, for the reasons which I have before stated. The draught, p. 198, was regularly taken, first twice, and then once a day, for a long period; the dose of the acetum colchici being 3iss. It did not once produce nausea or inconvenience. It will be readily imagined, that some chronic symptoms of pain in the limbs and difficult motion attended so determined a state of visceral complaint; but a comparison drawn between the sufferings of all his former fits, and on the present occasion, notwithstanding the effects of accident and careless-



ness of exposure, was to his own mind so favourable, that he spoke of every remedy which was used in the highest terms of satisfaction. No case could be more demonstrative than this of the perfect safety of the lotion; applied as it was with unlimited freedom; in a constitution which had so often shewn the tendency to retrocession, and indeed had suffered some actual attacks. After some difficulty and untowardness of treatment, the progress of amendment at length became perfectly favourable; and he can scarcely date the period when he has felt so much freedom from gout, as for some months past. He has, on several occasions, exposed himself to offending causes, with impunity. He is instructed to pursue every point of prophylactic regimen; and to enter upon a course of ass's milk, with a mild plan of alterative treatment, in order that the liver and connected functions may be as radically improved, as medical means can accomplish.

With attention to good rules, he is free from serious fears of relapse. If the gout return, he knows by experience that the painful symptoms may be readily controuled; but he is sanguine from his present satisfactory recovery, that he shall by care obliterate his tendency to gouty attacks.

I do not confine him to any severe restraints in his habits of living, and have allowed the regular use of the purest port, sherry, or madeira, in a limited quantity.

I myself entertain the confident expectation, that, with a due observance of prophylactic regimen, the future issue of this case will be quite satisfactory.

Such was my report of this case in June 1817. I have now, January 1819, to add the following account:

Not to make an unnecessary disclosure of private history, I must briefly state, that at various periods this gen-

tleman has been incautious in his general habits; and often indeed has unavoidably been inconvenienced by excess of anxious occupation, without exercise, or any regularity of meals.

In January, 1818, the feet and one knee were affected with gout for one week, in consequence of exposure to cold. This attack was preceded by head-ache, drowsiness, epistaxis, and those sensations of fulness of habit to which he was formerly subject.

In March, two days after receiving a severe fall in hunting, he travelled in the mail to the north of England, and, on a very cold night, with the wind at east, he incautiously slept close to the window of the coach, with the glass down. Thus exposed, and so recently under the influence of a violent shock to his frame from the fall, he incurred another attack, which in two days after took place in both feet, and continued about eight days.

In August, during the extreme heat of the weather, which rendered him feverish, and, in conjunction with great fatigue, very much disordered his system, he was attacked severely in each hand and one wrist, the fit lasting ten days.

On these several occasions, my usual active treatment proved perfectly successful, and a speedy controul was obtained over all the symptoms, without the least threatening of retrocession, or any untoward occurrence. In the attack of March, he travelled a great distance in a carriage, when suffering very agonizing symptoms of gout in the feet; so that it required all his fortitude to endure the torture which he experienced from keeping his limbs in a depending position, and from the concussion of the vehicle. He submitted himself to this painful and hazardous exertion from the desire of returning to London. His journey being completed, I visited him



on the 23d, and found his legs frightfully swollen, with an inflammation of an erysipelatous appearance extending in patches from the feet to the knees. In addition to the immediate pain of the gout, his system was in a high state of sympathetic irritation, and the spasmodic jerks which affected the limbs were unusually severe. So successful, however, was the combined method of treatment which I employed, consisting internally of the *saline* diuretic purgative, p. 198, with occasional doses of the mercurial pills, p. 297, and the narcotic pills of crude opium and James's powder very freely exhibited, the external remedies being the lotion in the day, and the poultice at night, that at the end of eight days he began to be favourably convalescent; and on April the 4th, felt so well and cheerful, that he was very desirous to engage in his favourite amusement of hunting.

Since August he has been free from gout. In his last communication, a few days ago, he says: "Upon the whole I feel much better in health than I have been for several former years, and I flatter myself that I shall be able to avoid any serious attack."

It is evident, that in this gentleman's case the gouty diathesis prevails so strongly as to demand unremitting attention in regimen and in all his habits, with an occasional course of medicine. He has of late constantly regulated his bowels either with the draught just mentioned, or with the pills, p. 303. The attacks which he suffered in the last year were strongly provoked by occasional want of care, or accidental causes; such as in another individual must have produced illness of some kind, but in his constitution gave rise to the gout. Yet the short duration of the paroxysms, and the immediate relief derived from the treatment, afford a happy contrast to the extent of his former tedious fits, in which the severe symptoms were



not on any occasion controuled by the ordinary routine of treatment. On one occasion he relates that he gave trial to the eau medicinale, without deriving from it even temporary relief.

## CASE XI.

The following case of gout is an additional example of a remarkable frequency of attack, even where the diathesis was wholly acquired, arising chiefly from the influence of a morbid state of the liver; and consequently pointing out, that in these instances our only method of cure for the gout is the adoption of that treatment which is the most suited to restore the action of the liver to health, and also to rectify the digestive functions in general. It further demonstrates that the action of gout, although not interfered with by any treatment, entirely fails to prove a curative remedy for such internal derangement; and apparently serves only to harass and depress the powers of the constitution.

S. J. aged 40, of middle height and bulk, and not very plethoric; of sanguineo-nervous temperament, and strongly bilious diathesis. Seventeen years ago had the yellow fever in a hot climate, and his constitution has never recovered the shock which it then received. Once since he has been severely jaundiced. Of moderate habits, and usually very careful. In general, sedentary, and disposed to retirement. Gout unknown in his family. First attack was in January 1814, in the great toe of one foot only. Has since had five regular paroxysms. Passed two winters in Paris, without any advantage from the climate of that city, as compared with a residence in London. His attacks always violent. In the fourth fit,

both feet and hands were affected. He usually adopted only simple treatment; and in the first two attacks did not use any remedy, but merely covered the parts with flannel.

In one paroxysm took magnesia very freely, which acted beneficially as a purgative; but on being discontinued left the bowels costive. Has occasionally complained of great debility of stomach, and, according to his own statement, "accompanied with shiverings, coldness of the extremities, weak pulse, very low spirits, total want of appetite, and, as it were by instinct (it being so contrary to his custom), a desire to take some spirituous liquors." Also, when he has found himself dyspeptic and bilious, has complained of the sensation commonly called that of *pins and needles*, in the legs particularly, and in the arms slightly.

In the third fit, having severe pain, inflammation, and swelling in one foot, he went into a warm bath at 95°, which for about a quarter of an hour very much relieved the intensity of the pain; but on his quitting the bath, it returned in an increased degree: and this fit proved of more tedious duration, and produced more œdema and weakness of limbs, than any which he has ever experienced.

I was consulted by this gentleman in January 1817, when the gout was affecting first the feet in the usual manner, and afterwards the hands. In union with this attack much jaundice was present, a furred tongue, loss of appetite, depression of spirits, the urine of a deep colour and depositing lateritious sediment, the fæces of a dark green colour and in every respect indicating bilious derangement; and the right hypochondrium was also tender on pressure. I directed in this case, repeated purgatives of calomel and colocynth, together with the

colchicum draught, p. 198, and use of the evaporant lotion, until all the acute symptoms were removed. Except on one night, the aid of a narcotic was not required. Of the lotion he stated, "that it quickly relieved the pain, heat, and throbbings of the parts, and he soon found his feet sensibly strengthened from its use." He did not suffer the subsequent œdema and debility of the ankle joints, which, on previous occasions had rendered him very infirm. He had recourse to the tepid salt water sponging in the morning, with bandages during the day, and a stimulating liniment at night, with the best effects, in the convalescent stage. He pursued a mild corrective course of mercurial medicine, in conjunction with the stomachic draught, described at p. 286, and took ass's milk night and morning.

By these means, steadily pursued, in unison with a strict attention to general regimen, he gradually lost his jaundiced complexion; no longer was sensible to any pain on pressure in the region of the liver; acquired a good appetite, cheerful spirits; and, in short, a general renovation of energy and comfort. Very soon afterward, this gentleman went to the Continent; and I have not had the opportunity of hearing of his health since.

## CASE XII.

Of the following case I shall give a brief sketch of those particulars, with which the patient has furnished me, of the general history of his gout; together with such details as appear to me to set forth, in an interesting point of view, the decided efficacy and importance



of active treatment in a severe paroxysm. The account also embraces other valuable facts.

C. R. aged 48, tall, corpulent, of plethoric habit, and the mixed temperament. Not subject to any other disorder than gout and rheumatism. The gout, not known in his family, first attacked him at the age of 21. In the first six or eight years the paroxysm took place about twelve or one in the morning, without any premonitory symptoms; but subsequently it was preceded by dyspepsia, and cramp-like twitchings of the legs and feet. In some of the fits he was bled freely; which served to abate the inflammation, but did not shorten the duration of the paroxysm, nor materially relieve the pain. The longest fit which he ever had, followed the practice of bleeding to the extent of 90 oz. in the space of four or five days. From leeches, used with great freedom, no good effect resulted; and sometimes they served to increase the inflammation, irritation, and pain. Seven years ago, he made an attempt to abridge his diet; eating meat only each other day, and abstaining from wine entirely; but allowing himself table beer. The gout returning, he resumed his usual habits of living, which of late years had been guarded, but not severely restricted. His fits after a time becoming more than usually severe, he resolved upon a determined plan of rigid abstinence. For the space of sixteen months, he abstained wholly from animal food and wine. He allowed himself some table beer daily; but in solids confined his diet to vegetables, milk, and plain puddings. By means of this plan, the state of his system became materially altered. The bowels were uniformly regular; the hæmorrhoidal discharge, to which he had been much subject, did not occur: the urine, which from every accidental excitement to the circulation deposited the pink or lateritious sediment, was in-

variably transparent, and light in colour. These changes began to take place in about six weeks from the commencement of the plan. In the course of this probation, he had some attacks of gout, with much less inflammatory action than before, as may be supposed; but, in opposite balance to the advantages which I have stated, his nervous system was affected in a distressing manner; he was always *comfortless*; very continually suffering general aching pains, which he indifferently called nervous, gouty, or rheumatic; and sometimes had short attacks of acute gout. His legs very commonly became much swollen after slight exertion. In short, he had in this way so little cause of satisfaction, that he returned to the use of animal food daily, and wine, in a very restricted quantity, occasionally. This improvement of diet proved very favourable to his constitution; and, with the great attention which was paid to the action of the bowels and the state of the secretions, he was not more affected with gouty feelings than before, during many succeeding months.

In regard to the frequency of attack, and the treatment which had on most occasions been adopted, during a series of years, I shall further cursorily mention the most interesting circumstances. In 1810, when suffering from a severe paroxysm in December, which had been preceded by an attack in October, he took the *eau medicinale*. The relief was so immediate, that he went out on the following day. A relapse took place in less than a fortnight. The *eau medicinale* was repeated with the same relief. In the spring of the following year, two or three slight attacks occurred, but a very severe one in November. The *eau medicinale* was taken early in this fit, and it seemed only to suspend the disease for a few days. It was then repeated. The effect was rather



more evident ; but it produced distressing vomiting, and the fit was lingering. In 1812, when under a second attack in the year, he reluctantly repeated the eau medicinale. The pain was somewhat relieved, but the sickness was insupportable, and the stomach would not retain either liquids or solids for many days. In 1813, he laboured under a paroxysm for three months, taking aperients and sudorifics regularly with very little relief. In 1814, he pursued the plan of abstinence. Suffered very troublesome pains in the wrists and hands, which continued many weeks. In 1815, he placed his dependance on the use of vinum colchici, which relieved the pain ; but the fit lasted a month, and the recovery was tedious. In 1816, he suffered from gout as usual. In 1817, a fit took place in September, lasting a fortnight ; but after the interval of a week, he relapsed and was confined to his chamber between three and four months. In this paroxysm scarcely any medical treatment was used, and never more than slight expedients, under the supposition, that, if Nature were permitted to relieve herself, the future intervals between the attacks would be longer, and the general health would become improved. In this expectation, however, the patient was disappointed. The fit finally left him tormented with chronic pains, which sometimes appeared to be gouty, sometimes rheumatic. Under these circumstances my opinion was consulted ; and I advised the combined use of sedatives, an alterative pill, and the draught, p. 198, to be continued as circumstances should direct, in conjunction with the regular use of the vapour-bath\*. He gradually got into better

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\* He made use of a portable vapour bath, which was constructed after a model obligingly lent to me by Dr. Park. It is



health, and derived very sensible relief and evident benefit from this last remedy. He stated, indeed, that it produced a more capable and comfortable state of limbs than he had experienced for many years.

In 1818, a fit, rather severe, induced by cold, came on in September, after his having enjoyed more than usual health and exemption from pain for a considerable time. It continued nearly three weeks; but the symptoms were less acute than usual. - He was not confined to bed. He resorted to the vapour bath with much relief. The poultice, p. 267, was remarkably useful, and the other treatment which was occasionally adopted, also succeeded. On the following occasion, however, my combined plan of internal and external treatment was conspicuously successful; and allows of a flattering comparison with the results of the empirical practice; the ordinary remedies of the physician; and the influence of the natural powers left to their own operation.

On December 26th, after a most unfavourable exposure to cold in the middle of the night, he was attacked severely in the knees; and almost every part of the upper and lower extremities became quickly affected in succession. I never witnessed a seizure of more determined violence. The symptoms were of the highest intensity. The deposition of bright pink sediment in the urine was more copious than I had ever before noticed. The skin was rather jaundiced, and the state of the bowels

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truly convenient in its application. I have engaged a male and female attendant to render their services when wanted, for the conveyance and administration of the bath to a patient; and shall be happy to extend its easy employment for other practitioners, by any communication and explanation in my power.

also proved the surcharge of the bile, and its obstruction in the proper channel. Recollecting the tedious sufferings of 1813 and 1817, he apprehended a similar continuance of confinement. To avoid prolixity of detail, I shall merely observe, that the remedies already amply described were administered in full force. During the symptoms, the kidneys were attacked with excruciating pain; at which moment the limbs were either more easy, or the attention was absorbed in the greater suffering. A copious bleeding from the arm gave immediate relief; and when ease was obtained, a small uric calculus was voided. The blood was sisy and much cupped. To conclude—the patient obtained so satisfactory a removal of this paroxysm, that, in rather more than a fortnight, he took walking exercise out of doors; and has not, on any one day since, been confined to the house. He follows up the treatment upon a mild alterative plan. When, from the exertions of the day, he experiences aching and some sense of heat in the ankles so recently affected, he applies the poultice at night with the happiest effect. He uses the morning sponging with salt water; and occasionally in the day, applies the lotion to the hands and wrists by sponging. His appetite and spirits are quite recovered.

*February 3rd.*—He continues well.

*March 1823.*—The report of this patient, who was formerly so severe a martyr to the miseries of gout, is highly satisfactory. For a year and a half past he has escaped an attack, and has enjoyed health and spirits, using care in diet, but not particular forbearance. He has taken almost every night a portion of the extract of colchicum with a small dose of opium, and a bottle of soda water every day at noon. In this particular instance the bowels have seldom required the influence of



other medicines. I have never seen prophylaxis more successful.

### CASE XIII.

A gentleman, aged 48, of sanguineo-nervous temperament, and of very bilious diathesis; affected with hereditary gout, and, having suffered frequent fits in the course of the last ten years, was attacked with severe acute symptoms in each foot and one knee. A few days previously, the second toe of one foot had accidentally suffered tight pressure from a new boot, so that pain and swelling soon followed as a consequence. At the moment when the inflammation of the other parts was at the height, the integuments of the toe were evidently in the state of abscess; and, on a puncture being made, a considerable quantity of curdy matter, mixed with particles of chalk-like substance, was forcibly pressed out. This, on being submitted to chemical examination, presented results precisely similar to those which I have described at p. 312. One of the fingers also, which had for a long time past been thickened in its tendinous sheaths, in this paroxysm, without the influence of external injury, became more than usually swollen, and so distended near the surface on the palmar side, that some fluid was distinguishable to the touch. On being punctured, much blood, and a small portion of the curdy pus, were discharged. This pus agreed in all its properties with what was furnished by the abscess. The thickened finger, which had long been deprived of free motion, was treated with the empl. hydrarg. cum sapon. in the day, and a mercurial poultice at night, with the best effects; and the toe was soon restored by simple treatment. The



gouty inflammation of the feet and of the knee yielded very favourably to the combined influence of purgative mercurials, the draught, p. 198, pills of crude opium and antimony, and the free use of the lotion; but I have chiefly introduced the short narrative of this case, as affording a striking instance of gouty inflammation proceeding to specific *suppuration*. In this, as in the former example, Case ii, the common integuments were the seat of the abscess. In the toe, which was injured from violence, we may conceive that common inflammation and gouty inflammation were mixed; but it certainly appears, that in gout, when the capillary vessels are from any cause excited to that increased action which is analogous to the suppurative, a secretion of urate of soda is the consequent result.

In the present case, during the whole continuance of the inflammatory symptoms, the urine deposited an excessive quantity of the bright pink sediment, and it was much loaded with urea. The fæces abounded with vitiated bile; pain, and tenderness to pressure, in the right hypochondrium, were felt considerably; and indeed every indication of an unhealthy state of liver, requiring an alterative course of treatment, was strongly marked.

It deserves to be noticed, that this gentleman had, a short time previously to this attack, made regular use of Dr. Scott's acid bath for five weeks; at first with seeming benefit, but eventually without the least sensible or apparent advantage; and certainly I found him labouring under bilious obstruction in a great degree. This, however, readily yielded to the purgative and alterative treatment which I employed; and, in its decisive result, might fairly be contrasted with the truly equivocal operation of the bath. I may also mention, that a few years

ago he made trial of the eau medicinale; which, in the dose of half a bottle, affected the bowels considerably, and quickly subdued the symptoms, but left the stomach very dyspeptic. The gout returned in three weeks, and assumed a chronic form. He then took the eau medicinale in doses of twenty drops daily, by which the pain was relieved; but his stomach became materially weakened, his legs much swollen, and the nervous system was affected with many distressing symptoms. He soon therefore relinquished the medicine.

He had never before experienced any signs of uric concretion; but has always noticed the pink sediment to be abundant in the urine during the paroxysm; and it was so in an extreme degree in this attack, during the whole continuance of the inflammatory symptoms; marking an extraordinary disposition in the system to the secretion of uric acid.

He stated, that in former fits not commencing with more violence than this, he had suffered far more severely, and for a much longer time. At the period of convalescence in this case, I directed an alterative course of medicine to be pursued for several weeks, with the free use of ass's milk; and that the empl. ammon. cum hydrarg. spread on leather, should be worn on the tender part of the hypochondriac region.

*May 1818.*—Has continued quite free from gout; but having been on the Continent, and lived on foreign cookery, his stomach has become unhealthy; and on this account, and with the view of preventing his usual annual return of the gout, he adopted, by my advice, a course of medicine for three weeks with perfect success. I have reason to believe that he has remained free from gout up to the present time (*January 1819*), and that he is in good health.



*March 1823.*—I saw this gentleman a year ago, when he gave me a very satisfactory report; seldom having been inconvenienced by gout, and having found the symptoms tractable when they did occur.

#### CASE XIV.

This, and the following case, are additional examples to the foregoing; shewing with how much certainty a secretion of urate of soda takes place, when the gouty inflammation does, as a very rare occurrence, proceed to the extent of suppurative action; and it is probable that, in such peculiar constitutions, this result may happen in whatever texture the inflammation may be seated; although it may be expected to take place most frequently in the common integuments.

A gentleman, aged 37, tall, robust, and rather corpulent, was first attacked with *hereditary* gout in the great toe at the age of 24; and from that period has seldom passed a year without more or less of severe gout. In his last fit, both feet, both knees, and one hand, were violently affected with inflammation. An abscess formed in a bursa at the ball of the great toe, and in the integuments at the heel. Each was opened, and a large quantity of the uric secretion, with pus, was discharged. That from the heel was a beautiful rose colour, the only instance of the kind which I have seen. The parts were treated with simple bread poultice. The bursal membrane continued to secrete this peculiar matter for a few days, and then healed favourably. In all the previous fits of gout, the inflammation had not proceeded to this termination; nor was any concretion to be discovered either in the upper or lower extremities.



In this case, as in the former, the urine gave a copious deposit of pink and lateritious sediment in the course of the fit. However much, therefore, this extraordinary action of the capillary vessels may be vicarious to the natural function of the kidney, in its secretion of uric acid, under the influence of chronic gout, which opinion I have stated at p. 155, it is nevertheless evident, that when *acute* symptoms are present, the occurrence of this phenomenon does not supersede the function in question; which, on the contrary, itself takes place in a preternatural degree.

### CASE XV.

A gentleman, aged 39, tall, of middling bulk, of bilious diathesis, was first affected with *acquired* gout at 34, in the great toe, and has since been attacked in almost every part of the upper and lower extremities. Has a considerable quantity of uric concretion in the cellular membrane at the elbow, in the bursæ at the ball of the great toe, and also in the lobes of the ears. Lately, a heavy person trod on the toe, and excited so much inflammation, that an abscess formed. The skin over the bursæ being much distended and very thin, a puncture was made, when a large quantity of the old concretion in the state of thick paste, and of the new puriform curdy secretion, was pressed out. A simple poultice was applied; and some pressure was used daily to remove any fresh portion of secretion. The wound shortly healed. Soap plaister, spread on leather, was worn over the part, and changed every second day. It promised to be perfectly cured. As the constitutional treatment in these cases was, in essential points, similar to that which I have em-

ployed in ordinary cases of gout, I have, for the sake of brevity, avoided such details.

The cases which I have now selected. I have reprinted from my last edition, without alteration, as I conceive that they form as useful a selection as I could offer. I am however induced to add a few more examples of acute gout, which further serve to shew the real inefficacy of empirical remedies, and the value of regular treatment.

### CASE XVI.

H. A. aged 44; rather corpulent, and of the nervous temperament. Has been indulgent in the daily use of wine and mixed spirits. The capillary arteries in the face are varicose, indicating an excited circulation. He has had six attacks of gout. In the present paroxysm, both feet were affected with acute inflammation, which was attended with severe pain. The usual treatment was employed. For the relief of the severe pain at night, he took pills of opium and James's powder. On the second day he was observed to wander much in conversation. It was attributed to the opiate, which was accordingly omitted. The intensity of pain, two nights after, made the opiate again necessary. The mind had been in a state of complete delirium for three days. It was abated rather than increased by the last doses of opium, and at the fifth day passed away. During this time the gout observed the usual progress. The excretions, both urinary and alvine, were of the worst description. The deposition of pink sediment was very abundant; the fæces were either green or clay-like. The tongue was furred, and the



fever of irritation was considerable. About eight days having elapsed from the beginning of the attack, and the gout declining in the most gradual manner, the following new circumstances occurred. The stomach became affected with urgent vomiting of a grass green fluid; and, from the bowels, profuse and frequent discharges took place of the most offensive grumous black blood. The pink sediment continued to be copious. The patient complained of severe pains in the abdomen, and each hypochondriac region was tender to pressure. The pulse was 130 in the minute, and throbbing but soft, shewing great action, with that irritability which belongs to weakness. There was exceeding prostration of strength. The delirium did not return, but the patient's mind was in the highest state of alarm. Saline draughts in effervescence, alternated with others containing small doses of *magnes. sulphat. infus. rosæ et tinct. opii*, together with small doses of *hydrarg. oxyd. ciner. et confect. opiat.* constituted the principal treatment for two days. The discharge of blood continued so profuse, that the debility became alarming. Draughts containing 20 *℥. ol. terebinth. et ℥. vi. tinct. opii*, were administered every three or four hours with great advantage; and much benefit was also derived from injections with *tinctura opii. et mist. amyli*. These injections materially relieved the tenesmus, which was very urgent. No food was desired or seemed acceptable to the stomach, except rice-milk and gruel. The symptoms gradually subsided, and the patient obtained a perfect recovery. In the convalescent stage, a gentle mercurial course was employed in conjunction with warm sea bathing and general restorative treatment. In this case the vessels of the liver and of the spleen were in a state of congestion, and the hæmorrhage was nature's most ready expedient. Yet, unless



this had been controuled, the constitution must have fallen a sacrifice to its excess, and to the violence of all the symptoms.

### CASE XVII.

R. S. aged 66, short and corpulent, of the mixed temperament, has rather a varicose state of the minute arteries and veins of the face. Has always been indulgent in his habits of living, partaking of wine, mixed spirits, and porter, daily. First had *acquired* gout in the ball of the toe at the age of 46. The present illness originated in exposure to continued rain, and remaining in wet clothes. On his return home, he drank freely of hot brandy and water, and went into a warm bed. In a few hours after he was seized with pain of the bowels, which was attended with constipation. The symptoms yielded to purgatives and a blister. On the third day he was seized with gout in the knee. The pain was extremely severe during ten hours, when it quitted suddenly; and the other knee became affected, and there the gout remained stationary. He took aperient medicines in the day, and saline sudorifics at night. Opiates always disagreed, and caused such excessive vomiting, that he preferred to endure pain. At this period he was attacked with violent bilious sickness, discharging from his stomach much grass-green fluid; and he became alarmed from finding his thighs and legs almost covered with petechial spots. The pulse was 104; he was drowsy; had cold perspirations, and complained of extreme debility. He expressed that his limbs did not seem to belong to him. Under these circumstances I visited the patient. The gout was gradually declining, and did not require any distinct

attention. The tongue was much furred; the alvine discharges were dark and offensive; the urine gave a dense precipitate on the addition of nitric acid. He took a saline draught in effervescence with the addition of a few grains of nitre, at short intervals, in alternate use with the following:

R. Magnes. sulph. ʒi.  
 Infus. rosæ, ʒx.  
 Spir. myrist.  
 Syr. tolutan. āā ʒi.  
 Acidi sulph. dilut. ℥. iv.  
 M.—Fiat haustus.

R Hydr. submur. gr. ii.  
 Pulv. rhei.  
 Extr. hyoscyam. āā gr. iv.  
 M.—Et divide in pilulas ii. h. s. s.

The constitutional debility, which really appeared alarming, called for the use of wine and a supporting diet, which the stomach, at this period, for the most part retained; but the hæmorrhagic diathesis became more decided; and, together with an increase of petechiæ, and even the appearance of ecchymosis in various parts, the urine contained a larger portion of blood. He suffered severely from pains of the limbs, and still more from shooting pains in the ureters, and also in the region of the kidneys, extending round the body. The tenesmus of the bladder was a most troublesome symptom; and occasional vomiting and extreme restlessness alternating with drowsiness, served to make this gentleman's situation truly distressing. A draught, containing ℥. xx. ol. terebinth was given alternately with the saline draught, with the

best effects, as the urine soon after ceased to be coloured. Light nutritious food was administered in small quantities. The case became very tedious, and although the acute symptoms were overcome, the chronic symptoms, for many weeks in succession, placed the patient in hazard. The vessels of the kidneys continued in a morbid state of action, the urine precipitating puriform sediment most abundantly. He complained of a pulsation in the kidneys, with much aching pain, and a feeling in the whole of the body below the chest, as if he had been violently bruised. Cupping over the kidneys was employed twice with advantage; and in regard to medicines, the saline and acidulated aperient draughts already mentioned, with occasional gentle doses of calomel, were the principal remedies. He became wasted in flesh almost to a shadow, and again and again his situation seemed hopeless. At length, however, more favourable symptoms appeared. A removal to the sea side, and a course of the warm bath; the use of the sarsaparilla mixture, described at p. 288; asses' milk; two basins of leek broth daily; a regulation of the bowels by mild aperients; and supporting proper diet; concurred, with the healing hand of Time, to restore this gentleman to perfect health.

### CASE XVIII.

E. S. aged 45, tall and robust; first had gout at the age of 38, in the ball of the great toe. Inherits it from his mother. From his youth upwards was subject to asthma, until seven years ago, when gout began; and since that time he has been wholly free from the former complaint. The



asthma sometimes recurred at the interval of a month ; but, in damp and cold weather, it would make its attack every night, and usually between twelve and two in the morning. The pain at the pit of the stomach was often severe. Hot fluids gave relief. In the present fit of gout, both feet and knees, and one wrist, were severely affected. During the day, his mind had been under very acute anxiety from accidental causes. He was seized about two in the morning with excruciating pain across the diaphragm, and the difficulty of breathing was excessive. Opium administered freely in conjunction with æther and camphor mixture gave speedy relief ; but the application of a large blister produced important good effect, and relieved the tenderness of parts occasioned by the intense pain which had preceded the remedies. The gout had not in any degree receded. This was not an example of retrocession. The real curative treatment consisted in the free employment of calomel purgatives, and the use of the saline form of the draught, p. 198. I believe that the original asthma, as it has been always called, was rather to be considered as dyspnœa depending on a disordered state of the digestive organs in a gouty constitution, than genuine asthma ; and I do not doubt, that if treatment founded on this view of the case had been adopted at an early period, the patient would have been spared much suffering. This gentleman recovered without any further untoward circumstances.

### CASE XIX.

R. W. aged 45, corpulent and robust, remarkably of the nervous temperament. Was first affected with acquired gout at 25 ; and a year has been the longest in-

terval of exemption. The fits have always been extremely severe, and all the various symptoms most urgent and distressing. Intense pain, extreme restlessness, the utmost depression of spirits, the most profuse perspirations not affording any relief, frequent vomitings, painful cramps, and jerking of the limbs, have formed the catalogue of his miseries in his usual fits, which were always protracted, and yet were followed by relapses, when convalescence appeared to be taking place favourably. On two occasions nephritic symptoms occurred in a severe degree. I saw this patient in one of the most urgent of his fits; and it was pleasing to witness the speedy and certain controul which was obtained over the symptoms. The skin was jaundiced, and the deposition of bright pink sediment was copious. The alvine evacuations, procured by means of the mercurial pills, p. 297, and the draught in the saline form, p. 198, administered twice or thrice in the twenty-four hours, were at first dark almost to blackness; next they assumed a yeast-like and frothy appearance; and then changed to a light yellow, still with frothiness. The following mixture was more successful in relieving pain than the usual pills at p. 240.

℞ Potassæ Carbonat. ℥iss. gr. xviii.  
Succi Limonum (recentis), ℥ii.  
Mist. Camph. ℥vss.  
Syrupi tolutan, ℥ss.  
Liquoris opii sedativ. ℥ii.  
Antimon. tart. gr.  $\frac{3}{4}$ . M.—Fiat Mistura.

Of this mixture the patient took four table spoonfuls in the first dose, and was directed to take two more every hour until relief should be obtained. The second dose was completely successful, procuring sound and refreshing sleep, and gentle perspiration. I should notice, that



in one of his fits he had been tempted to take the eau medicinale. The pain of the gout was relieved, but the most distressing effects otherwise were produced. He describes that the bowels seemed to be paralysed, and he did not recover the tone of his stomach, and the perfect action of his bowels, for six months. He suffered very much also from protracted debility of the limbs. He was recovering favourably from the fit which I was treating, when unfortunately he exposed himself prematurely to a cold atmosphere, made more inimical by an east wind; against which every invalid, whatever his illness may have been, should most carefully guard himself when convalescent. Great imprudence was committed in this instance, as alterative mercurial medicines were at this very time producing their full but proper action on the system; and marked occasion for this particular treatment was indicated by the faulty state of the liver. A relapse of gout was the penalty of this indiscretion, but the symptoms were, as before, tractable, and he gradually recovered. I advert to this circumstance of relapse, in order to demonstrate as strongly as it is in my power to do, that in those severe examples of gout, in which the functions of the liver are materially deranged, the patient must submit to tedious treatment for his cure, and be attentive in every part of his regimen, carefully avoiding exposure to damp and cold. In the fit season of the year, and the patient being properly prepared, a visit should be made to Cheltenham; and afterwards to the sea side, for the advantage of the air, and a proper course of the tepid bath. In order to reform the state of the constitution, and procure future years of improved health, a systematic plan of management, in this kind of series of remedies, should be diligently followed up for a considerable period of time.



## CASE XX.

T. D. aged 44, corpulent, plethoric, of the nervous temperament, was first affected with gout in the ball of the toe at the age of 30; his grandfather was the nearest relation who had gout; he has had frequent and most severe fits, some of which, with the troublesome consequences, have continued for four months. He had made trial of the wine of colchicum, with scarcely any relief to the symptoms, and it produced sickness and faintness. I was called to this gentleman when he was labouring under acute gout, in both knees and both feet, and in the tendons of the ham. The torture which he experienced was almost insupportable. He described the sensation in the hamstrings as if a fire was consuming them. The muscles on the calf of the leg were affected with agonising cramp; and, in short, I cannot describe the picture of suffering which this patient's situation displayed. I directed that he should take immediately 3 gr. pulv. opii crudi, joined with gr. ii. extr. colch. acet., and repeat one grain of opium and half a grain of James's powder every hour till he should obtain ease. The draught, p. 198, was administered every six hours, and when ease should be procured, he was desired to take pills containing hydr. submur. pulv. Jacob. et extract colocynth. compos. Locally, the belladonna ointment (p. 279) was applied to the skin on lint, and over it a poultice made with the lotion. The treatment was speedily and perfectly successful. When the aperient draught too much affected the bowels, a pill with extract of colchicum was given with the following draught:

R. Liquoris ammon. acet. ℥iv.  
Mist. Camphoræ, ℥viii.  
Syr. tolutan, ℥i.

M.—Fiat haustus.

The pain was entirely controuled, and the recovery of the patient proceeded in the most favourable manner. This was a case in which an unhealthy action of the liver prevailed in a great degree, as was made evident by the nature of the alvine evacuations, and the copious deposit of pink sediment. The alterative use, first of calomel, and afterwards of pilula hydrargyri, was pursued for a considerable time. The restoration of strength was much assisted by the saline form of the bark draught (p. 236); and with regard to the weakened limbs, they were successfully treated with friction and champooing, salt water sponging, and stimulating liniments.

### CASE XXI.

R. S. aged 29; tall and robust; of the nervous temperament. Had an attack of inflammation in the ankle, first at 22. Was then in India. The stomach became suddenly affected with pain and vomiting, when the inflammation of the ankle suddenly subsided. In subsequent attacks in which the knees and wrists were affected, bleeding from the arm was freely employed, as the disease was then pronounced to be inflammatory rheumatism; but by this treatment the constitution was seriously lowered, and without any satisfactory abatement of the symptoms being produced. I saw this gentleman first, when labouring under evident symptoms of gout in the knees, feet, and hands, which had attacked

him in succession. The bursæ at the knees were very much enlarged. I scarcely ever witnessed a higher degree of general sympathetic irritation; and the pain of the inflamed parts was excessive. I treated him on the principles laid down in these pages, with perfect success. Opiates at night gave great relief. A poultice made with the lotion proved the most useful application to the knee joints; and to the other parts the linen compresses were applied. The acute and painful symptoms were overcome in the most favourable manner; but the complete cure required a considerable period of time. This was a case in which the symptoms had been often obscured by peculiarity of constitution; but an unhealthy condition of the liver was the real foundation of the disease; and it is needless to observe, that much perseverance in an alterative plan of treatment was required. This patient derived material advantage from the entire disuse of wine and fermented liquors for several months, as he was extremely susceptible to the influence of stimulus. Finally, his weakened limbs became restored by the use of the Buxton bath, and friction. This gentleman inherited the gout from his father; and, as a further index to the nature of the disease, most of his fits were preceded by a general *embonpoint* appearance, so that the attack was often foretold, when it was observed that he was looking too well.

## CASE XXII.

R. W. aged 38; tall, corpulent, and robust; of the nervous temperament. Has lived the greater part of his life in India. First had gout in the ball of the toe at the age of 26. His grandfather on each side had gout. On



one occasion, after exposure to wet and cold, he was suddenly seized with rigors, quickly followed by vomiting, which continued for the space of three weeks. He was then free from gout, but had a severe attack five months after. His nervous system was always exceedingly disturbed in the paroxysm, the pain being intense; spasms and universal catchings being also violent. He had taken eau medicinale, which did not relieve sufficiently to compensate for the distressing nausea and vomiting which it produced. I saw this gentleman labouring under a severe fit of gout affecting the lower limbs. The symptoms yielded in a reasonable time; but, from premature exposure, a relapse took place. When inflammation was removed, and a promising convalescence had again commenced, a pain of the most agonising description affected two or three of the cutaneous nervous branches situated on the instep. There was no external appearance of complaint; and, except in the course of the nervous branches, the foot would allow free pressure, but the limb was wholly disabled; and his whole frame was in so exquisite a state of morbid sensibility, that he could not tolerate the least noise in the chamber, and could scarcely command his mind in any degree. In the instep itself he experienced a severity of pain which I never witnessed, in an equal degree, in any case of gout which has fallen under my notice. He was altogether in so spasmodic a state, that I almost apprehended the coming on of tetanus. He was quite free from fever. Even the pulse was not accelerated. Musk and ammonia were given with advantage; but the chief relief was derived from pills containing crude opium and the extract. acet. colch. In the first twenty-four hours he took twenty grains of opium, and eight of the extract. This treatment by degrees proved successful. The local applica-

tion of the belladonna ointment was beneficial, and in a short time it assisted so much as to diminish the necessity of using opium internally with any great freedom.

This gentleman's constitution was distinguished by many idiosyncracies. Doubtless it had been much injured by a residence in a hot climate, and by frequent illness. He recovered perfectly.

### OBSERVATIONS.

Numerous cases have come under my care, in which frequent and vexatious relapses of gout have taken place, in connexion with an unhealthy state of the bowels and the secreting functions of the liver. As the gouty symptoms were not of an unusual character, I am unwilling to occupy any unnecessary space in detailing them. I shall merely offer, therefore, a very general history of the most material facts. The patients in question were rarely conscious of any error in their digestive functions; the appetite being regular and good; and any sensations of indigestion being only seldom experienced. In most of the instances comprehended in my present description, Wilson's tincture had been taken, with no other good effect than that of producing a temporary cure. The relapses were so frequent, and took place at such short intervals, that my advice was desired, in order to the administration of regular means of treatment.

Upon investigation, I found that the bowels were in the most unhealthy state, the *fæces* assuming every unnatural appearance; varying at different times, as being clayish, olive green, dark almost to blackness, or occasionally a light yellow and frothy, and attended with remarkable *fœtor*. Usually they contained much mucus. The urine most commonly deposited



either pink or brick-dust sediment. Very great perseverance in the use of alterative treatment was required. The relapses of gout continued for a considerable time; and at first the patients were discouraged by such apparent failure of my treatment. Yet each paroxysm became milder, and the intervals longer. It is satisfactory to add, that, in every case, a permanent cure was at last accomplished; so that the patient, instead of having an attack every six weeks or two months, has remained quite free for a year and a half or two years; and the constitution has been in all respects healthy. I have stated that, in most of these cases, the patient has not been conscious of any error in the state of the digestive organs; but there were a few exceptions. In one instance, a gentleman was affected with pains in the abdomen, which occurred chiefly at night; and although they abated by means of the treatment, they did not quite yield till the bowels began to acquire a healthy condition.

Another gentleman suffered much inconvenience from irregular shooting pains, which affected him both in the bowels, and in the course of the ureters. It was evidently sympathetic, and dependant on as faulty a state of the biliary secretion, and of the bowels themselves, as I ever witnessed. The sympathetic pains required the use of sedatives.

Even in these two instances, the stomach was not disturbed in its functions, the appetite being regular and good.

With respect to the exact medical treatment which I adopted in these cases, I think it will be sufficiently instructive to speak of it in general terms. The forms of the same disease are so much modified by individual constitution, that a corresponding variation of treatment is necessarily required. In the intervals between those attacks of acute gout, which arise so entirely out of the



error of the liver and the bowels, as already stated, I found the mild alterative use of mercury, combined with an aperient, indispensably necessary. According to circumstances, I commonly prescribed either a draught consisting of the sulphate of magnesia and calcined magnesia, with a portion of acetum colchici, in an agreeable vehicle of almond milk, syrup of tolu, and tincture of ginger; or one with tinct. benzoës comp. calcined magnesia, aq. aneth. and syrup of tolu, with or without the addition of tinct. jalapii, according to the influence produced on the bowels. The preparation of sarsaparilla, mentioned at p. 288, was, for the most part, the corrective tonic which I selected. The diet and general regimen were carefully regulated. Asses' milk, taken in the morning early, about half an hour after the draught, was invariably useful, in acting as a mild diluent, and assisting the action both of the bowels and kidneys.

### CASE XXIII.

A gentleman, aged 36, of middle height and bulk, and entirely of the nervous temperament, has suffered from occasional attacks of *acquired* gout during four years. In the first fit, the ball of the great toe was the part affected. When on duty in Spain, in the Peninsular war, he contracted an ague, from which he does not consider himself to have been perfectly free, except at short intervals, during this long period of time. I visited him when suffering from an acute attack of gout. No symptoms of the ague then appeared; but when he perfectly recovered from gout, it shewed its influence in a very irregular manner, causing in some part every day a slight rigor, and a general sense of coldness, seldom followed by heat of skin. Nervousness was distressing in

the highest degree. Previously to the ague, he possessed a firm constitution, and great muscular activity ; but for a long time past every exertion has been irksome. His habitual sufferings have been depression of spirits, sleepiness almost throughout the day, inaptitude both to mental and bodily exertion, so that not only has society been unwelcome, but he becomes hysterical if suddenly interrupted in his retirement. I was convinced from observation that the liver was in this case in a very faulty state of function, and in so great a degree as to explain many of the symptoms ; but the nervous system was distinctly affected with morbid sensibility. The internal use of mercury aggravated the nervous symptoms, so that after a few days it could not be continued, even in the mildest doses. He had made trial of various remedies without success. The liquor arsenicalis soon disordered the stomach ; and bark, either in substance or decoction, caused oppression. He had used the nitromuriatic acid bath, and taken these acids internally without benefit.

I directed that every other night, or occasionally for two nights in succession, he should rub in a portion of mercurial ointment over the right hypochondrium ; and, due attention being paid to the regulation of the bowels, that he should take the sulphate of quinine three times a day, in conjunction with the sarsaparilla mixture. He began with the dose of a grain, and increased it to three grains. This medicine agreed perfectly, and very much improved his strength in a short time. The feelings which he called those of ague abated. The secretions were beginning to improve, and I anticipated a favourable result of this interesting case ; when I was prevented from observing its progress, by this gentleman's affairs suddenly calling him abroad. It was my



intention to advise the aid of the tepid bath at the sea side, and the use of horse exercise, as the favourable season of the year should advance, following up the mercurial plan of treatment in reference to the morbid action of the liver; and administering the quinine so long as it should agree and be required.

This compendious form of one of the most essential principles of the cinchona, for the knowledge of which we are indebted to the French chemists, appears to deserve our confidence; and to claim our choice in those instances which now and then occur, of the necessity of a decided employment of bark, with an inability in the stomach of the individual patient to receive it without disagreement.

In another case of quotidian intermittent, unconnected with gout, the patient could not take beyond a few doses of bark in substance, without producing oppression of the stomach and head-ache; and from the use of this new medicine he derived a cure.

It is on such occasions that the physician feels himself indebted to the labours of the chemist; and that the close connexion between the science of chemistry and of practical medicine, becomes pleasingly illustrated.

#### CASE XXIV.

I state the following case of frequent and severe occurrence of gout, as also of sick head-ache, yielding so completely to the same plan of treatment, that in this individual example, the two complaints, however distinct in their nature, appeared to owe their support to the same cause of irritation.

D. A. aged 51, tall and of middle bulk; of the nervous temperament; was first affected with hereditary



gout (from father and mother) nine years ago, at the ball of the great toe, and since in various parts, a fit taking place usually twice in the year, and sometimes more frequently. The premonitory symptoms: acidity of stomach; depression of spirits; the pulse, which is always rather irregular, becoming so in a greater degree; and cramps in the muscles of the legs.

He has also been much afflicted with the complaint commonly called sick head-ache, which is preceded by remarkable coldness of the feet, and by that kind of nervous depression the day before, which gave him the desire of taking more than his ordinary quantity of wine. On the day of the head-ache he could not bear cold air, or the use of cold water; and he was completely overpowered with torpor, and the most extreme oppression of sleep. In investigating the several symptoms producing this two-fold suffering, I found a permanent state of disorder in the functions of the liver, the alvine evacuations being constantly of an olive green appearance, and the urine depositing copiously a bright pink sediment; that portion the most which was secreted between dinner and bed-time. The acute symptoms of gout yielded very favourably to the means of treatment which I have detailed in this Treatise; but the still more important consideration was the adoption of an alterative course of medicines, applicable to the disordered functions of the liver. A mild dose of mercury with James's powder and compound extract of colocynth, joined either with the use of the saline form of draught at p. 298, or the one prescribed at p. 201, comprehended the corrective aperient plan of medicine. The warm bath was useful, as also country air and horse exercise. Perseverance with medicine was required for at least a year, the frequency of doses being gradually lessened; but such

has been the reward of this gentleman's patience and attention in regard to medicine, and general regimen, that for the last year he has scarcely been affected either with gout or head-ache; and in diet he can take occasional liberties, which formerly would have been a source of certain sufferings. The secretions are become for the most part healthy. He almost constantly takes at bed time an aperient pill; and when he notices any proof of error in the functions of the liver, he promptly has recourse to the use of the alterative aperients.

I shall here conclude my account of Acute Gout, and proceed to the next division of my subject.

## CHRONIC GOUT.



THIS species of gout, according to its characters, which I have offered at p. 14, occurs most commonly as an ultimate consequence of the acute form of the disease; and appears when the paroxysm has not formed a crisis; or, when repeated attacks have so much enfeebled the constitution, that strong inflammatory action no longer takes place. In this case, the former severe paroxysms, which occurred at distant intervals, become exchanged for those which are milder, but which are more frequent and irregular.

This chronic state of gout is more commonly blended with wandering pains than *the acute*; and these pains have now and then the rheumatic character, and are at other times indefinitely nervous. It occasionally occurs in subjects in whom the acute form has never existed; but examples of this kind are comparatively rare, and are found more frequently among women than men. In this mode of attack, it seldom happens that the great toe is the part affected; but sudden swelling and pain, having but little of the regular character of gouty inflammation, fix in preference on the hand or wrist, or instep, and about the ankle.

When the chronic gout occurs as a sequel to the acute, the various parts which have been inflamed in the paroxysm continue affected alternately or in conjunction.



The following may be offered as a further description of the local and constitutional symptoms in both the states here mentioned, viz. when original and when consequent.

The sensations of the affected part are rather those of heat and coldness alternately, than of the more continued *burnings* which take place in the acute disease; but, as in the acute, the night time is most the period of active pain. Frequent numbness is present, and an uneasy sense of fulness, bulk, and weight. The muscles, tendons, and ligaments appear, from weakness, unequal to their office; and cramps, which especially affect the lower limbs, occur even in the day, but mostly at night, when the patient attempts to take his first sleep\*. Starting also, in the imperfect sleep which is procured, takes place in a very distressing degree, both when chronic gout is present, or when it is threatened. If any redness appear on the surface of the pained parts, it is of a pale colour and usually transient: sometimes it is of a purplish hue; but often, indeed, the skin retains its natural colour, and especially when the knee is the part affected. The bursæ and the sheaths of tendons are much more the seats of complaint in the chronic, than in the acute gout; and these textures acquire a very continued state of puffiness and distension, producing, at the wrist and instep, the matted feeling of parts to which I have adverted in a former page. In situations more cellular, œdema is very permanent; and this is attended with a preterna-

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\* Sydenham observes, “ The tendons of the muscles of the tibiæ are sometimes seized with so sharp and violent a convulsion, or cramp, that if the pain it occasions were to last only a short time, it could not be borne with patience.”

tural fulness of the adjacent veins. In debilitated constitutions a swelling of the feet and ankles, sometimes extending upwards to the knees, appears in so questionable a form, that the patient apprehends the approach of dropsy; or, from the absence of much pain, although he is totally disabled, he calls it the dumb gout.

In the most favourable state of the general health, the ankles are affected with aching and a distressing sense of heat after every unusual exertion in walking. The tenderness of the parts on pressure; the shooting pains of different nerves; the painful difficulty of motion, and entire want of energy in the limbs, under any effort of the will, belong also to the local debility produced by the disease. The state of the constitution in chronic gout embraces a great variety of symptoms, which are modified by the temperament and the habits of the patient; by the situation and degree of local disease; and also by the seat and nature of the internal visceral derangement. Indeed so many anomalies often arise in this impaired state of the health, partly depending on internal causes, and partly on the painful or uneasy state of the affected textures, that probably no description would be adequate to include all these shades of sympathy; and it may be sufficient to delineate a general outline.

It most commonly happens, that the patient is severely dyspeptic, and that the stomach is distressed with various uneasy sensations. A craving desire of food, and nausea, are often felt alternately. Oppression after an incautious meal, and flatulent distension, attend the gouty dyspepsia in an urgent degree; and to this may be added *heart-burn*; or, in some individuals, a coldness at the stomach of a peculiar nature and intensity, compared occasionally



to that of marble, or even of ice. Fugitive spasms affect the muscles of the abdomen, or ribs; or cramps occur, which are of more distressing continuance.

In many examples in which the appetite seems natural, the patient has not the feeling of benefit from his diet; and when this is of too stimulating a kind, the irritation produced by local uneasiness grows into feverish action. An exceeding irritability marks the temper. The mind is hypochondriacal; imaginary evils disturb the judgment, and shake the resolution on trifling occasions. Palpitations affect the heart; and the sensations, described as flutterings, are still more frequent. Either from pain or uneasiness, the sleep is disturbed and unrefreshing. I have met with female gouty patients in particular, who are so exquisitely sensible to the vicissitudes of atmosphere, that instantly on the change of the wind to a cold quarter, and especially if accompanied with moisture, they feel wandering pains in the limbs; and indeed are so susceptible, that their nerves are true barometers.

In the worst instances of the disease, a general *cachexy* takes place; or the former bulk of health is partial; so that the lower limbs are wasted and weak, and the abdomen becomes large. The secretions are more or less vitiated. The bowels are in opposite states, but for the most part costive; and the bilious secretion is deficient and unhealthy. The hæmorrhoidal veins are often painful; and blood, either arterial or venous, is occasionally discharged; but, when in much quantity, it is venous and very dark. The urine is variable, being influenced by many circumstances. In some instances it is in sparing quantity, and much concentrated; in others it is abundant and dilute. In that of the morning, there is



usually much mucous deposit; and under excitement of the circulation from disease or diet, the uric sediment (pink or lateritious) is almost certainly present.

A gentleman, much afflicted with chronic gout, informs me, that he notices his fæces to be particularly clay-coloured, and that the pink sediment appears in his urine, when he is most complaining of weakness and pains in the limbs. He relates, that in walking he suffers much aching and sense of heat in the ankle joints; pain in the loins, with extreme lassitude and general feeling of debility. His stomach is weakened, and he experiences indigestion from slight causes.

A lady who has never had a decided attack of gout, is sensible of a remarkable debility of the joints, when she notices a considerable deposit of lateritious or pink sediment in the urine.

A sallow appearance of the complexion; sometimes a yellowness amounting to slight jaundice; occasional pain in either hypochondrium; a torpid action of the bowels, and an evident deficiency of bile in concurrence with much irregularity in the quantity and appearance of the urine, more especially when it deposits the pink or lateritious sediment; comprise a condition of the constitution which frequently attends upon chronic gout.

A gentleman who has not often been affected with acute fits of gout, complains of a heavy feeling in the feet, so that he cannot walk with comfort, and also he has occasional shooting pains. At night he has starting of the limbs, and in the day time he suffers from languor and much nervousness. Under these circumstances his bowels are in a very unhealthy state, indicating obstruction and wrong action of the liver. There is also much lateritious sediment in the urine.

Another gentleman describes that his ankles feel as

if sprained, and remarkably weak ; they swell also. He is languid and nervous in the day, and his nights are restless. The bowels are remarkably torpid ; the bile is deficient, and the urine is loaded with sediment.

When the gouty diathesis is disturbing the constitution, and affects the limbs without producing a paroxysm, it constitutes that state which may truly be called one of chronic gout. The nervous system is affected in various ways. Those who are deaf, suffer an increase of deafness. The powers of vision are not so regularly strong as usual.

Strange sensations affect the head. One mentions that he has the feeling of a strong wind blowing into the ears. Another, that, when falling asleep, he has the sensation of a gust of wind diffusing itself through the brain, producing much confusion and a degree of giddiness.

With these two patients actual gout has sometimes quickly followed such sympathies.

Noises in the ears of various kinds are ordinary symptoms. Even the sense of taste is morbidly changed. The action of the heart is much influenced by this state of the system ; but it is variously affected. If it act with irregularity permanently, the suspicion must be entertained that its organization is in some way affected ; but if it be only temporary, it is to be regarded only as a sympathy. Sometimes it precedes the gout for a longer or shorter time, and becomes regular when the fit takes place ; but in other instances it is the companion of the fit, and ceases when the active symptoms pass away. An irritable state of temper prevails, and the patient is peevish and distressed.

A chronic cough is not unusual ; and in some cases it is of a primary nature ; but more frequently it is truly sympathetic, and depending on the faulty state of the digestive organs. I have repeatedly seen instances of



this kind, in which the patient and his friends have been alarmed for the safety of the lungs; but the cough has entirely yielded to the treatment best adapted to the threatening symptoms of gout; and in these cases, I have not forbidden the moderate use of wine. I have described the nature of this cough at p. 17.

In other instances, an habitual excess of mucous secretion in the trachea, proves a very troublesome symptom, even when no cough is present. This, which is represented as a viscid nauseous phlegm, accumulates during the night, and causes much difficulty of expectoration in the morning.

Another example of chronic gout may be stated, in which the natural functions appear, at the first view, little disturbed from their healthy action; and irregular pains, and transient inflammation at the ordinary seats of the disease, with consequent lameness, constitute the patient's chief complaint.

In this case, however, it will be found, on accurate investigation, that the internal functions are not healthily performed. Although the tongue may bear a healthy appearance, and the appetite may be good, the state of the secretions is more or less faulty; there is probably congestion of vessels below the stomach; the general balance of the circulation is interrupted; and the nervous system, as a certain consequence, is much disturbed.

Such are the forms of broken health and frequent sufferings, which chronic gout produces. When neglected and left to its natural progress, its inroads on the constitution are so sure and constant, that the afflicted patient, in many cases, is indebted to the genial summer alone for a state of partial ease.

In this state of the frame, any internal disease which



is casually produced, assumes a modification more or less remarkable, in consequence of the gouty diathesis; and as I have formerly observed, such occurrences have been the fruitful source of error and confusion, both in theory and practice.

I shall endeavour to give a more exact and familiar description of the nature of chronic gout, than I have here attempted, in the several cases of the disease which I shall presently offer.

### CAUSES.

WHEN it is considered that the chronic state of gout is truly a modification of the acute, and that it is essentially the same disease with a difference of degree and circumstance; it follows as a consequence, that the same general pathology, with an exception which I shall presently offer, must be applicable to each. I trust, therefore, that, in my remaining pages, I may with propriety adopt a convenient conciseness of discussion; and depart from that close analytical arrangement which I have hitherto endeavoured to observe.

It appears to me that the difference in the agency of the remote causes, either as producing the acute or chronic forms of the disease, must be wholly referred to the particular state of constitution. If, when the gouty diathesis prevails, the system possess considerable energy, and the action of the heart and arteries be in sufficient vigour, the acute symptoms will be produced by the free application of the remote causes.

If, on the contrary, languor and debility possess the frame, chronic symptoms and various anomalies arise.

In the theory which I have offered of the *first* paroxysm of acute gout, as it usually appears, I have considered that a redundancy of blood, chiefly affecting the circulation of the vena portarum, induces, in persons of a certain predisposition, temperament, and diathesis, the peculiar inflammation of gout. In a favourable case, Nature with her own powers relieves the system by this process, and health returns.

The circumstances of the chronic disease, as the term itself expresses, are very different; and the constitution is involved in a more complicated manner, than in this theory of the first fit of *acute* gout. To the returns of the acute attacks, however, a similar principle of pathology may apply, as to the chronic; observing the modification which arises from the different states of the powers of the circulation and of the nervous system, as I have so lately explained.

It remains that I should briefly describe, in a more particular manner, the chief causes which influence the production of chronic gout.

It sometimes happens, that the gout not appearing till the patient has arrived at an advanced age, it is connected with a plethoric state of system which is joined with much debility; and then, chronic symptoms alone take place. The disuse of former exercise, and increased indulgence in the general habits, introduce the disease in this manner.

Examples of the gout assuming in its first invasion the chronic form, as early as the middle age of life, most frequently occur in females of weak constitution, whose parents have been, one or the other, gouty. It may be added by way of explanation, that the remote causes are applied more weakly in the female sex; and hence, in women, the gouty action is often less completely



evolved than in men. The mismanagement of the paroxysm is probably the most frequent source of the chronic symptoms. The neglect of purgative medicine, and the injudicious employment of stimuli, produce irregular inflammation, indirect debility, and excessive nervous irritation. The improper use of mercury powerfully contributes to produce these effects. Hot clothing of the inflamed parts, as is usually practised, prolongs the symptoms, and increases the tendency to relapse from slight external causes.

In the examples which are most obstinate and untractable, the causes will certainly be found to exist in some visceral disease. The liver itself is most usually the chief organ affected; but I have sometimes been persuaded that the spleen has also betrayed strong symptoms of disease; and which have concurred to support the gout. It is in the chronic form of gout that we often meet with the worst instances of dyspepsia, and that the urgency of flatus is so remarkable. This state of complaint is certainly existing in connexion with the vitiated condition of the bile, and of the whole alimentary secretions. A deficient or irregular action of the kidneys is also an usual attendant. In the majority of cases of chronic gout, it will be found, according to my observation, that a state of unhealthy function in some department of the œconomy of digestion is the great supporter of the symptoms; and that the irregularity in the general circulation, and also the train of nervous symptoms which so commonly supervenes, are entirely of a secondary nature. An obstruction in the vessels of the *vena portarum*, giving rise to the features of complaint described at p. 85, and subsequently, is the most ordinary deviation from health in the digestive organs, which is found to occur with gouty persons.



The true nature of this description of case is often very obscurely marked. Occasional aching of the shoulder, or shoulder blade, usually on the right side; a fulness and tenderness to pressure in the epigastric, or hypochondriac region, accompanied with hypochondriasis, and irritability of the temper, are the remote symptoms which very commonly appear; but sometimes it happens that the patient does not make any complaint of his general health; and the real malady is only to be detected by a frequent examination of the urinary and alvine excretions.

The *eau medicinale* has been the fruitful source of many cases of chronic gout, by enfeebling the nervous system; and occasioning, together with irregular pain and obscure inflammation, a degree of despondency and languor never before experienced. The same observation applies to the use of other gout specifics, as Wilson's and Reynolds's tinctures, and the *vinum colchici*; and I can with truth affirm, from troublesome experience, that no chronic cases of gout are so tedious and untractable as those that have been empirically treated by these medicines. On a former occasion I have fully explained their merely palliative and temporary influence; and that although they subdue the present symptoms, they leave the inherent seeds of the disease in stronger and more radical force. By the frequency of relapse, there becomes added to the original difficulty of cure, that which belongs to the *habit* of diseased action; in the same manner that an intermittent fever of long standing resists the usual remedies with more obstinacy than one which is recently contracted.

In proportion as the gouty diathesis is strong, and the constitution is unsound, so will the power of all the remote causes be more strongly marked. Thus, where

the susceptibility is established in a great degree, every accidental exposure to wet and cold, and even the influence of the east wind alone, will more or less give rise to flying pains, and inflammatory action of a slight and transient kind. An unfavourable season of the year, and in proportion as damp is united with cold, prolongs the existence of the gouty symptoms. Thus winter and the early part of spring prove adverse to a cure, in those instances in which the gout has long exerted its dominion over the constitution. Those who have not yet become martyrs to the disease, will not suffer thus sensibly. The climate of the metropolis sometimes exerts so unfavourable an influence as to retard the cure.

Distress of mind acts powerfully in keeping up the symptoms of chronic gout. I have seen very strong proofs of this fact; so that, in some constitutions, while the feelings are anxiously and much afflicted, it is truly difficult to accomplish a cure.

Accidental injury sometimes brings forth gouty action when least expected. A gentleman canvassing for his election, received so familiar a squeeze from a constituent, that gout took place in his hand on the following day.

## DIAGNOSIS.

THE distinction of chronic gout from *chronic rheumatism* is seldom very difficult, when all the circumstances, both general and local, are carefully considered. Chronic rheumatism, not preceded by the acute form, occurs much more frequently than chronic gout\*. Our opinion

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\* Dr. Haygarth, in his *Clinical History of Disease*, mentions, "that out of 470 cases of rheumatism, only 170 had the rheumatic fever."



will be assisted by reference to the constitution of the parents. The presence or absence of dyspeptic sympathies is not a certain criterion of distinction; but it may be stated as a general proposition, that the natural functions are much more deranged in chronic gout, than in chronic rheumatism; and invariably, according to my observation, when the disease originally fixes itself as chronic gout; but when it succeeds to the acute form of the complaint, the distinction in question is less remarkable. I have seen some examples, in which, the pains of chronic gout affecting those who have had frequent acute fits, have very much assumed the character of rheumatism, and have not been attended with any disorder of the appetite or digestion. The structure, constitution, and temperament of the patient; his age, and his habits of living; together with a consideration of other remote causes, must be brought under review. Dr. Clerk, with great confidence, founded his distinction of the two diseases, as he says\*, “on white ropy filaments floating in the urine, which when taken out of it are pellucid, and when dried turn to a kind of calx.” This cannot be justly considered as a pathognomic symptom. Such an appearance of the urine (produced by mucus and saline matter) occurs in various kinds of disease, in connexion with disordered digestive functions.

The character of the local appearances, in chronic gout and chronic rheumatism, is an important point of distinction. Although the gout in its chronic form is still more fugitive and uncertain in the part which it occupies, than when acute; and in this respect approaches nearer to the nature of rheumatism; yet it is much more

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\* Edinburgh Phys. and Lit. Essays, vol. iii. p. 442.



disposed to attack the hands and feet than the last disease, and also to be more solitary in its situation.

From the circumstance of rheumatism affecting tendons at their insertions, the aponeuroses of muscles, the ligaments, and branches of nerves, more frequently than any other parts of structure, and consequently not producing in these situations any very evident swelling, it has been assumed by Dr. Haygarth\*, “that absence of tumour constitutes a clear criterion of chronic rheumatism, from acute rheumatism, gout, scrophula, nodosity, and white swelling of the joints.”

In a reference to three hundred cases of chronic rheumatism, he remarks, “Out of the whole number, only fourteen patients were noted with any swelling in the seat of the disorder; and it appeared, upon a more careful and deliberate investigation, that all these fourteen cases ought to have been classed under the other genera.” I am now confining my notice to gout; and to me, I confess, it appears, that the ground of diagnosis which is here chosen, ought not to be expressed in such conclusive terms. I wish to offer my difference of opinion from that maintained by the able and experienced author whom I now quote, with becoming diffidence; but I will at the same time freely state that the following has been the result of my observation. If the chronic gout affect the foot or hand generally, an œdematous swelling is almost certainly present; but if the chronic rheumatism be so situated, this kind of swelling most commonly

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\* On the discrimination of chronic rheumatism from gout, acute rheumatism, scrophula, nodosity, white swelling, and other painful diseases of the joints and muscles.—Med. Trans. of the College of Physicians, vol. iv.

does not take place. If, however, the bursæ mucosæ and the thecæ of tendons be the seat of complaint; namely, either of chronic rheumatism or chronic gout, the external characters are very similar. Under each disease the bursal membrane becomes distended to a great degree; and this is often seen in a remarkable manner at the knee joint. The mutual resemblance also in the distension of the tendinous thecæ, which, at the wrist particularly, produces considerable fulness of parts, further serves, in my apprehension, to destroy the accuracy of the diagnosis in question.

The textures which have been often affected with gout, become so much debilitated as to be very susceptible to vicissitude of temperature, either in the house or abroad; and in this way, the general disorder may often partake of *rheumatism*. It is only from such combination, that I can attach any propriety to a very common expression, *rheumatic gout*. I do not conceive that gouty inflammation and rheumatic inflammation can exist in *the same part*, at the same time; but certainly we find gout and rheumatism occasionally existing in *different parts* of the body at the same time. Of this last fact I have seen many instances. The patient, when he has gout in the regular situations, suffers, in consequence of some partial exposure to cold, a rheumatism in other parts, as in the muscles of the neck, or in the shoulder joint: and a seizure of lumbago at the time of the invasion of the gout is also not uncommon.

The peculiar affection called "Nodosity of the joints," is distinguished by Dr. Haygarth according to the following characters:—*Almost peculiar to women; without fever; the swollen joints on examination representing an enlargement of the bones themselves; the comparative*



*freedom of the integuments from inflammation; the muscles seemingly not affected\*.*

It is true that in many examples this complaint does affect the phalanges of the fingers, so as to produce the appearance here described, caused, we may suppose, by the thickening of the cartilaginous and ligamentous textures; but I believe that, more commonly, the nodosity in question affects the small bursæ belonging to the tendons rather than the immediate structure of the joints.

In some examples of this disease which have come under my observation, the bone-like hardness of the affected parts; the general state of freedom from pain, and which at no time was severely felt, together with the absence of sympathetic disturbance of the digestive organs; have sufficiently convinced me of the distinction of the complaint from gout. On the other hand, I have seen a few instances in which the gout has always been so local, that one or two tendons only on the hand have been occasionally affected with the usual characteristic pains, in sympathy with certain states of the stomach; and some cases also, in which, the bursæ belonging to the sheaths of the tendons of the fingers have been so knotted, as truly to be in the state of nodosity; and have now and then given slight evidence of gouty inflammation, no other part having at any time been affected. It usually happens that with this change of organization, the particular phalanx which is affected (usually the last) is so distorted by the action of the muscles, as to present a crooked appearance. I learnt, in the history of some of these cases to which I allude, that the gout was

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\* Clinical History of the Nodosity of the Joints.



a family complaint. The larger bursæ mucosæ are liable to a peculiar form of disease, distinct both from gout and rheumatism; which, in the chronic form, gives rise to considerable swelling produced by the distension of the bursæ; the membrane secreting a preternatural quantity of its synovial-like fluid. These tumours are free from tenderness, and cause inconvenience chiefly by the muscular weakness which is induced in the affected limb. A swelling of one or more of the bursæ sometimes takes place suddenly in certain constitutions, in connexion with the occurrence of gonorrhœa. I shall have to relate a case of this description.

It is scarcely probable that chronic gout can be confounded with the pains and swellings produced near the joints by secondary syphilis. In such affections, the symptoms have a more increasing progress than those of gout; and are also much less influenced, either as to relief or aggravation, by slight external causes, or by diet, or the state of the mind: and it may be added, that the syphilitic characters presented to the eye, and to manual examination, are in general sufficiently marked to be recognized without danger of mistake.

## OF THE TREATMENT.

FROM the history which has already been delivered of chronic gout, the necessity of an extensive application of the principles of pathology for its elucidation must appear as an immediate deduction. It is only by a theory founded on just physiology, and by a practice resulting from careful discrimination, that our footsteps can be safely directed in the present path. In acute diseases,

the bold hand of the Empiric, or even some happy effort of Nature, may sometimes be speedily successful; but when the chronic form of disease is deeply established in the system, no pretended universal or even expeditious method of cure, or treatment founded on a partial application of principles, has any just claim to our regard.

In the practical arrangement of my subject which I have now to offer (using the privilege of some recapitulation), several distinct modifications of the disease may be presented to our consideration.

I. From an original languor of constitution, or prevalence of the nervous temperament, in which, although the gouty diathesis is strong, the powers of the system have been insufficient to produce the acute form of gout; irregular pain, swelling, and difficult motion, are the symptoms which chiefly appear. The internal functions are weak and unhealthy, and much nervous sympathy is present.

Here our indications will be chiefly derived from the state of the chylopoetic viscera, and from an attentive observation of the several secretions. It sometimes happens that stimulating medicines, and too cordial a diet, have produced, in this constitution, a slight degree of inflammatory diathesis, joined with plethora; but, even in this case, general bleeding will seldom be allowable. The employment of purgative diuretic medicine in the saline combination, such as before recommended, with the occasional interposition of a dose of hydr. submur. et pulv. Jacobi. and the abstraction of all heating stimuli, will usually constitute a treatment of sufficient activity.

The soothing influence of narcotic medicine should be employed at bed-time, for the relief of pain and nervous irritation. Active doses of opium are however both unnecessary and injurious; and indeed some other narcotic will usually be found sufficiently powerful, and therefore more deserving of choice. I have already, when speaking of narcotics in the treatment of acute gout, entered fully into detail; and shall here only state, that, for the relief of those minor pains of chronic gout, I have found great success in the use of stramonium and lactucarium; and also, of lactucarium with p. ipec. comp.; prescribing the last medicine in very small doses.

In chronic complaint, when we are not compelled by urgency of symptoms to choose the most active forms of medicine, it is desirable to select those which act in a gradual yet effectual manner. As opium restrains the action of the bowels (a circumstance of only slight objection in the treatment of the acute symptoms, when we are at the same time administering active purgatives), we gain a great advantage in the cure of chronic gout, by the use of the weaker narcotics, which have not this effect; and although the extract of henbane is on this account an excellent medicine, and its soothing powers are not to be disregarded, I have usually found that lactucarium combined with stramonium, or pulv. ipec. comp. or with both medicines, has been the most useful.

The local treatment is to be conducted exactly on the principles formerly described. Inflammatory tenderness being removed by the use of the evaporating lotion as already fully described, and by the influence of internal medicines, friction and bandage will be eminently useful.

The more permanent method of practice comprises the improvement of the internal functions, by a plan of



medicine, and of regimen, corresponding to the changing indications.

Tonic medicines are usually injurious, and tend rather to fix than remove the disease. Whatever formula we choose, it must be our care to promote the functions of the liver and the kidneys, to correct the morbid processes of disordered digestion, and excite the action of the bowels, without nauseating and weakening the stomach. The *tinctura benzöes composita*, formed into a draught, and given once or twice a day, in conjunction with *magnesia*, is an useful stimulant to the bowels, and at the same time corrects acidity. The draught mentioned at p. 198, in the saline form, administered in the morning early : and one, in the middle of the day, consisting of *cascarilla* or *gentian* infusion, in equal proportions with *decoct. al. comp. et mist. camph.* to which the carbonate, or the compound spirit of ammonia may be added ; or the preparation of *sarsaparilla* described at p. 288 ; comprise the forms of medicine, which, in a general recommendation, I am most induced to mention.

In a course of treatment, it is desirable that the dose, if of fluid medicine, should not be repeated more than twice in the day ; but if the bowels do not become sufficiently excited, the use of some purgative pills at bed-time should be added. I may mention, as useful, a combination of the *pulvis alöes compositus*, *pulvis rhei*, et *sapo durus*, with a small addition of the *pulvis Jacobi*. As a part of the plan in question, the alterative use of some mild mercurial oxyd is of especial importance. In the summer season, the use of the warm sea bath, twice or thrice a week, will usually form a valuable auxiliary to the other remedies.

If, when the secretions are rendered permanently

healthy, debility of stomach and general depression should remain, we are consequently led more distinctly to the use of a tonic; but in this choice we must guard against the effects of heating stimulants.

The regimen, in every particular, must be carefully regulated according to the individual constitution; but daily exercise in the air of the country, and the avoiding of a diet too full and stimulating, are cardinal points of observance.

II. The consequence of acute gout, when its repeated invasions have impaired the energy of the constitution; and from the weakened circulation which is induced, the chronic diseased action alone takes place. The functions of the internal viscera are more or less deranged; and the nervous system is much disturbed.

In this example, we commonly see that the primary character of constitution remains to so great a degree, that signs of plethora are often manifested; and slight local inflammation is readily aggravated by the injudicious use of stimulants. Under these circumstances of vascular susceptibility, in conjunction with languid powers, the treatment which has been stated in the preceding example is generally applicable. The alterative aperient plan will, however, sometimes be required to a greater extent, and for a longer continuance. The state of the secretions will be the true guide to the practice which should be adopted. Material information will be derived from a knowledge of the specific gravity of the urine. I have invariably found, that so long as this has been very high, the more or less active employment of a diuretic purga-



tive has been attended with the best effects\*. The draught, p. 198, taken in the morning before rising, and repeated in the middle of the day if required; and the compound calomel pill each other night, or the combination of pilul. hydrarg. et pulv. Jacob. with extract colocynth. compos. or extract rhei. usually prove very successful in answering this intention of continued evacuation; but I have sometimes found the action of the kidney to be so deficient, that it has been necessary to join some other diuretic combination with the draught in question. In a very torpid state of the bowels, I have occasionally added guaiacum to the purgative ingredients with advantage. When the practice now mentioned has been sufficiently pursued, a tonic mode of treatment will

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\* It may interest the curiosity of some of my readers that I should mention the following formula of *the Chelsea pensioners'* medicine, which, it will be seen, consists of ingredients that are in common use. This is a heating medicine; and I should consider it an improper remedy in the paroxysm. I am informed by some individuals, that in the intervals of their fits, they have found it agree very well, as a purgative.

“ Take of flower of sulphur, two ounces.

“ Cream of tartar, one ounce.

“ Rhubarb powder, two drachms.

“ Guaiacum, one drachm.

“ Honey clarified, one pound.

“ One nutmeg, finely powdered. Mix them intimately.

“ Two large tea spoonfuls to be taken night and morning, and to be persevered in till the whole is consumed. For the three first nights, a large tumbler of warm rum and water is to be taken at bed time; or, if fever is present, white wine, instead of rum.”



follow in the order of succession. But in some instances of prevailing fulness of the habit, local congestion is pointed out, and the consequent propriety of relieving the loaded vessels, by cupping, becomes manifest. An obstructed circulation in the liver seems to be the common cause of partial determinations of blood in gouty persons; yet the symptoms are considerably varied. When the right or the left hypochondriac region is affected with pain and tenderness, the blood should be drawn from these situations. If pain, heat, and sensible fulness distress the head, cupping at the neck will be an appropriate remedy; but it should be well remembered, that the symptoms now described are of a secondary character; and the permanent cure will be found in the judicious treatment of the chylopoetic viscera, and in the collateral points of practice.

I repeat, that notwithstanding the patient shall complain distinctly of all these distressing feelings, which indicate a fulness in the vessels of the head, and render the use of cupping at the neck indispensable, as a remedy for the immediate symptoms, yet the permanent cure is to be obtained by such a continued use of aperients and alteratives, and regulated diet, and general regimen, as shall effectually remove obstruction in the vessels of the liver, restore its secreting functions, and adjust the processes of digestion in all its parts, to the healthy standard.

The following instructive statement I will offer in the words of the patient :

A gentleman of full habit, and for many years subject to gout, occasionally experiences a spasmodic constriction at the pit of the stomach, attended with a feeling of languor and inertia in the whole frame. He is so listless, that he seems to lose his mental powers. In the same

proportion that he regulates or neglects his bowels, he is well or ill. When they are restrained, he suffers torpor of mind and body, and walks with difficulty and pain, like a crippled person; but this is quite reversed when the alvine functions are in due performance. All this too belongs to the parts below the stomach; for he does not complain of indigestion in the stomach itself.

What has already been said of local management, need not here be repeated.

In the various shades of the chronic gout; between that fulness of habit and remaining degree of action, in which the symptoms approximate to those of the acute form, or even sometimes are actually converted into it; and that universal languor and debility, with which the weakest inflammation alone is found connected; the practice must also be accordingly modified.

In this last case, it may be stated, that although the use of stimulant and tonic medicines is indicated, and demands occasional preference, the purgative and corrective intentions must equally be fulfilled, to a given extent. Subcarbonate, or the neutral carbonate of ammonia, will be found a medicine highly useful when stimulant treatment is indicated, and may be favourably joined with the compound decoction of aloes, infusion of gentian, and peppermint water; the alterative pill also being employed.

For the relief of symptoms of a spasmodic and nervous character, which are connected with debility and morbid sensibility of the stomach, a stimulant antispasmodic medicine may be given occasionally; such as a conjunction of the aromatic confection and carbonate of ammonia, or æther, with camphor mixture; but, to palliative remedies of this kind, the patient should not too familiarly resort.



In certain states of debility and general disorder, into which some gouty invalids decline; or in anomalous cases of disease, where gout has not yet existed, but is suspected; and when the symptoms are those of excessive languor, or even of partial privation of function with a threatening of general paralysis; it has been a common practice to invite a fit of the gout by various modes of stimulating treatment.

The propriety of this proceeding is certainly as questionable, as its object is difficult of attainment; and it does not seem warranted by the amount of benefit, which Nature in her spontaneous production of a paroxysm occasionally confers. It is always hurtful, and sometimes hazardous, to excite a weakened circulation into strong action; and it cannot be denied that the active means which are thus injudiciously adopted to urge the gout, may produce, instead of it, an apoplectic fit. I apprehend that the true method of treatment, on the occasions to which I have alluded, consists in a regular and persevering attention to the chylopoetic functions, both by means of medicine and regimen, according to the principles of which an account has already been offered.

The learned and experienced Dr. Heberden observes on this subject; "In complaints of a chronical nature, whatever suspicion there may be of gout, it would be no bad rule of practice, not to direct the waters of Bath, nor any other remedies which are supposed to give the gout, if they would be improper when the same complaints arise from other causes; but to content ourselves with putting the general health into the best state, by strengthening the appetite and digestion, and by relieving the urgent symptoms\*."

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\* Commentaries on the History and Cure of Diseases, p. 45.



The Bath waters, judiciously employed, are unquestionably a remedy of great value, in some states of the constitution consequent on gout. Authors seem, however, very well agreed, that they should be forbidden when any inflammatory diathesis is present\*.

The late Dr. Parry, an authority of great weight, informed me, “that the Bath waters, in no form whatever, are beneficial during the paroxysms of gout, or in any inflammatory disposition which may exist in the interval.”

In that dyspepsia of the gouty, which is joined with a languid circulation and a great deficiency of nervous energy, and where neither organic congestion nor inflammatory tendency exists, these waters appear calculated to be eminently useful; and the praises of authors and of patients concur in justifying the reputation which they have acquired. The cheerful influence of such a watering-place; the repose of mind which is obtained by those who leave the cares of business behind; the improved regularity of all the habits; and the change of air itself which is usually a remedy of no small power; and, finally, the confidence of benefit with which the mind is inspired; concur in procuring the relief, and in effecting those cures which are attributed to the waters of Bath.

I have collected from patients many instructive re-

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\* Dr. Gibbes, at the same time that he recommends the powers of the Bath water to relieve “the debilitated state in which the patients are left after a severe fit of the gout,” observes, that “when the gout is, as it is expressed, flying about a patient’s constitution, the warm bath is highly dangerous. I have heard of very dismal consequences resulting from an imprudent use of the bath in such a state.”—Treatise on the Bath Water, vol. ii. p. 34.

ports of the effects of the Bath waters ; and shall recite a brief abstract of those which are most interesting\*.

A gentleman, aged 41, whose constitution was much debilitated by frequent attacks of gout, and who possessed entirely the nervous temperament, suffering in the intervals of the paroxysm chronic pains and much weakness of limbs, pursued a course of the water both by its external and internal use for three months, in the summer season. The *hot bath* occasioned at the stomach both a remarkable sensation of weight and of coldness. The Cross bath did not produce any such effect, but its continued use made him feel more weak and languid than usual ; and he quitted Bath without having derived any ease to the limbs, or received any kind of improvement.

A gentleman, aged 28, of robust appearance of constitution, in his second fit was attacked in the great toe of the left foot. Leeches were applied freely, with relief. In three days the right ankle was affected, and leeches were again used. The inflammation was scarcely in any degree abated, and very quickly the right knee was seized. A large number of leeches was now applied to this knee, and with apparent advantage ; but the left was as immediately attacked ; and he describes that all the parts thus treated with leeches, remained extremely weak and subject to chronic pains for nine months, at which period he went to Bath ; there he bathed, and received also dry pumping (so called because in the

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\* I have embodied my sentiments on the qualities of the Bath and other waters, of which I am now making brief mention, in " A Treatise on the Chemical and Medical Properties of the most celebrated Mineral Waters of this Country."



use of it, the affected part of the body only is wetted, whilst the rest is kept dry) on the weakest parts, for a course of thirteen weeks; at the same time regularly drinking the water. He returned completely cured.

A lady, aged 54, of strong constitution, but of the nervous temperament, suffering chronic pains and weakness of limbs, and a spasmodic state of stomach from slight causes, entered on the usual course of the waters. From the unfavourable determination of blood to the head, and consequent confusion which it occasioned, its internal use was soon discontinued. General immersion occasioned languor, and increased the general debility; but dry pumping, both on the stomach and on the weakened limbs, produced the best effects.

A gentleman, aged 33, of the nervous temperament, and not of strong constitution, having often suffered severely both from gout and rheumatism, and being afflicted with the pains of chronic gout, which had been induced by exposure to cold after the use of the hot bath, went to Bath, and entered on the regular course, drinking two rummers a day, and bathing three times a week. He pursued this plan about three months, omitting all medicine, except some ordinary pills to regulate the bowels. Previously to drinking the water, his urine had deposited pink sediment very copiously; but after a few weeks he seldom noticed this appearance. He found his appetite and spirits much improved. With respect to the local effects of bathing, he described that on those days he had less stiffness and aching than usual; but the amendment was only transient. He used a temperature from 97° to 100°. He quitted Bath without having received the least material improvement.

When this gentleman came under my care, soon after this period, I found very manifest indications of an un-



healthy state of liver, and adopted a plan of treatment accordingly. The ankles were thickened at the joint; the integuments were œdematous; and one knee was much enlarged from bursal distension. All the muscles of the lower extremities were small, relaxed, and very weak. Extreme lameness, with much awkwardness of gait, was the consequence. I recommended the usual plan of salt water sponging to the whole limbs, a stimulating liniment to the weakest parts, and night and morning a systematic method of friction, with speedy good results. The case terminated in the most favourable manner.

A gentleman, aged 55, robust and plethoric, first attacked with gout at the age of 29 (the disposition not hereditary), suffered a severe paroxysm in the beginning of autumn, which was regularly and successfully treated. In September, being quite convalescent, he went to Bath, as it was his occasional plan to do. He favoured me with the following statement: "After the usual preparation by aperient medicine, I commenced the drinking of the water of the Cross bath, with one glass of the middling size before breakfast, and the same quantity before dinner. It agreed with me as usual on former occasions, always giving me an excellent appetite, and an extraordinary flow of spirits. At the end, however, of eight days, I began to feel the approach of gout very sensibly in the feet, and in short was quite lame. My physician considered that the water was too stimulating, and advised its discontinuance. I should remark, that I was not sensible of any fever, and did not notice the usual discolouring of my tongue, nor the appearance of the pink sediment in my urine during this attack. After, however, the swelling of the ankles had subsided, I was still distressed with flying pains about them and my feet.

I was next recommended to try the effect of the King's bath, and not to think of the internal use of the water. I bathed in consequence every other day, and finding the plan agree, and that the pains in my feet sensibly diminished, I continued it regularly, five weeks; and the result was very satisfactory indeed."

The following concise reports serve to shew the necessity of duly preparing the system, in order to the favourable employment of the Bath water.

G. S. much subject to gout, but considering himself free from all threatening symptoms, began the water of the King's bath, without making any preparation. After drinking two glasses he was seized with a fit.

C. D. aged 52, of the nervous temperament; first affected with gout a year ago, having been under a short course of aperient medicine, and appearing to be sufficiently prepared, made cautious trial of the water; but after a few days, he experienced feverish excitement, obstruction of bile, and uncomfortable feelings of the head; so that it was necessary to return to the former plan. This being pursued a sufficient time, he resumed the use of the water with much advantage.

R. S. aged 66, had been subject to gout thirty-nine years, and lately suffered in a great degree from nervous depression, weakness of stomach and general languor. He first drank the water, having only premised the use of an aperient draught. It disagreed, causing uneasy feelings in the head. He was then cupped, and the result was so favourable, that he resumed the water, and drank it for three weeks with great benefit.

H. A. aged 50, gouty for ten years past, of bilious diathesis, labouring under weakness of stomach and many nervous feelings, entered upon a course of the water. A very confirmed jaundice soon took place,



which was imputed to the injudicious employment of the water.

W. R. aged 45; of the mixed temperament, plethoric; first affected with gout at thirty-five. Without previous preparation, he drank the water for ten days; his sight became dull; he declares that he felt senseless from the confusion of his head, and also experienced great lassitude. All these symptoms yielded to a course of alterative and purgative treatment.

R. V. aged 51; of the mixed temperament, extremely susceptible to the influence of stimuli; first affected with gout at twenty-six; having a weak state of stomach, and much nervousness, visited Bath and drank a second size tumbler of the water three times a day, for several weeks. He was rendered more indisposed in every respect. He became affected with palpitation of the heart and in the epigastric region, alternately; and also with faint perspirations. He then went to Cheltenham, and took the water No. 4. At first, it caused sickness; but, with perseverance, he found it agree; and gradually all his unpleasant symptoms disappeared.

A gentleman, mostly of the sanguineous temperament, many years subject to gout, found so much excitement from the Bath water, that during the whole course of it, he could not take even half a glass of wine without finding himself inconveniently heated and stimulated. Observing, however, every precaution, he derived benefit from the water.

From a peculiar state of the nervous system, the hot bath sometimes disagrees. I have met with a few individuals who found at Bath, from bathing in the hot bath, such a remarkable coldness at the pit of the stomach, that with difficulty they regained any comfortable warmth.



A gentleman, subject to severe attacks of gout, being of a plethoric habit, and imprudently not having used any preparation, experienced, after twice bathing, head-ache and very feverish symptoms. It would have been proper that he should have lost some blood from the arm, and have taken aperient medicines, as preparatory to any use of the Bath water.

Simple as the composition of the Buxton water appears to be, its internal use demands caution and preparation. In persons of great susceptibility in their temperament, and especially if also possessing a fulness of habit, it quickly produces head-ache and flushing; and the gouty patient would be in danger of producing a fit of gout, if he persisted in drinking the water, not having been properly prepared. I conceive that this stimulating quality of the water may be attributed to its impregnation with azotic gas.

I am acquainted with many instances in which the chalybeate water of Tunbridge Wells has, after a short course, excited an attack of gout. The patient finds his stomach sensibly strengthened; and, from its early effects, promises himself great advantage; but, ere long, he is overtaken by the sufferings of gout.

A gentleman relates to me, that being in doubt whether on a former occasion his complaint had really been the gout, at a subsequent period, suffering from dyspepsia, he took this water as an *experimentum crucis* with regard to the gout; and soon after, a decided paroxysm followed.

In most instances, and indeed almost without exception, when care is used, the waters of Cheltenham prove highly beneficial to gouty persons; and particularly when joined with a medicinal alterative, and with regulated regimen. Yet it not unfrequently happens, that the influence

of their stimulating properties predominates, and that they have the effect of exciting a paroxysm. The water No. 4, is that which is most suitable to the gouty patient, and especially in the first instance.

It is injudicious, however, in any gouty person to enter on the use of Cheltenham water without previous advice. Some instances have come to my knowledge, in which, from the neglect of suitable preparation, the drinking of the waters at Cheltenham has caused a very severe and protracted fit of gout. It ought, I think, to be considered, that when the liver is much obstructed, and when great torpor prevails in the whole alimentary canal, the employment of Cheltenham water should rather be the concluding than the beginning part of our treatment.

The waters of Leamington are entitled to similar praise with those of Cheltenham; and also require the same degree of caution in their use.

Both at Cheltenham and Leamington the springs are numerous, and many of them differ in quality, as I have set forth in my Treatise on the subject. The gouty patient must carefully avoid those springs which have a chalybeate impregnation, unless directed to their use by medical advice. I have known persons to be very sensibly inconvenienced in not confining themselves to the drinking of the pure saline water. The active ingredients in a mineral water being diffused in a large proportion of fluid, it must now and then happen, that flatulency and distension ensue in such a degree, as to require that the use of this class of waters should be abandoned; but in most instances, these effects disappear as soon as their operation becomes well established.

In reasoning upon the composition of the sulphureous water of Harrowgate, I have always been induced to con-



sider it as a very fit summer alterative for gouty persons ; and for those, who, together with the gout, suffer any inconvenience from cutaneous affection, it particularly recommends itself. I collect a favourable general report of the effects of the water from several gouty patients who have visited Harrowgate ; but I must add, that some have found its influence such as to excite an attack ; they being, as I imagine, much charged with the gouty diathesis at the time. One gentleman observes, that he took two glasses a day, and used the bath each other day, remaining in about five minutes. In a fortnight after he was seized with gout, and it proved to be the most severe fit which he had ever experienced.

Another gentleman considered it to be in an equal degree curative. Having recently had a fit, he took three large glasses daily, which acted most favourably. The gout went off gradually, and he regained perfect health.

Some, under my observation, have made use of this water at home, having imported it in bottles of convenient size. One of these patients observes, that two half pints daily affected the bowels in some degree, but acted more remarkably in causing perspiration. I may here notice, that I have ascertained by examination, that the Harrowgate water bears removal, and can be kept a considerable time, in sealed bottles, without material deterioration.

Finally—of this water, as of the waters of Cheltenham and Leamington, I have again to observe, that, in certain constitutions, occasionally it fails to act as an aperient, and also causes disagreeable distension and flatulent oppression. The operation of all the waters depends in a great degree upon management ; and usually some alterative pills should be joined with their use.



A course of any of the mineral waters which have been now mentioned, with some exception that may be made in regard to Bath, obviously demands a favourable time of the year, in order that their effects may be aided by suitable exercise in the open air. It happens on most occasions, that the gouty patient requires an alterative aperient course of medicine, at a season, when the visit to a watering place is not to be prescribed. It follows, then, that we should pursue our plan of treatment at home; and indeed when the gouty diathesis has been evidently strong, I have preferred, under any choice of circumstances, the decided activity and efficacy of medicines, to the use of mineral waters. When the patient has been suffering rather from oppression of his powers than loss of strength, in consequence of the influence of a morbid state of the digestive organs (to use a comprehensive expression), I have avoided tonics, and, in my usual treatment, have prescribed an alterative pill on alternate nights; the draught, p. 198, in the morning early, every day; and a course of ass's milk, half a pint being taken about half an hour after the draught. If languor prevail, I prescribe in the middle of the day the second draught described at p. 286, using either cascarrilla or gentian as circumstances may require. Regimen is of all possible importance.

The most difficult and untractable cases of chronic gout which I have seen, have been those in which the empirical treatment (whether in the use of the eau medicinale, Wilson's or Reynolds' tinctures, or even the vinum colchici when trusted to as a specific) has been employed; and I have found a disposition to relapse implanted in the constitution in proportion as such treatment has been long continued. Much perseverance

therefore is often required in the use of regular methods of treatment, before this habit of relapse can be overcome. In the acute paroxysm, the physician sometimes experiences the disadvantage of an impatience in the mind of the invalid, from the slower progress which he makes, contrasted with the rapid apparent cure which he has before obtained by one or two doses of his favourite nostrum. But in the chronic gout we have the same evil in another shape. The nostrum has produced the tendency to quick relapse: and has proved how impossible it is to cure, in the true sense of the word, a disorder which has been slowly arising out of the faults of the constitution, by one or two doses of a supposed specific medicine.

I have the satisfaction to add, that I have, in an extensive number of cases, succeeded most satisfactorily, after a time, in gaining the ascendancy over the state of constitution which I have now described; finding that the disposition to gout, by degrees, has lessened as much as before it increased. This, indeed, may be expected from the united influence of the corrective and aperient plan of treatment, in conjunction with regimen.

III. I have to consider a chronic state of gout also arising out of repeated acute attacks, in which, local changes of structure have been produced in a great degree; the nervous system is highly sensible to the influence of external causes; but the state of the natural functions proceeds for the most part in a healthy course. I have in this description presumed that the energy of the constitution is retained in considerable vigour; and that the injury which the attacks of gout have produced, affects chiefly the limbs. With this form of chronic weak-



ness, rheumatism is often blended, and the patient is extremely susceptible to every vicissitude of weather, and especially to wet, and to damp cold air.

Sometimes he rises seemingly strong and comfortable; but after a little exercise, especially if the weather be unfavourable, his joints become painful, affected with a sense of heat, and almost disabled; together with aching of the loins, and general lassitude and weakness. The symptoms are very various in different cases. Some, by the exertion of a walk, dismiss the symptoms with which they rise in the morning. One gentleman informs me, that on some occasions he goes to bed with such threatenings of gout, he expects a fit by the morning; and, instead of this, he is so much relieved and alert, that he is able to hunt.

In the pains and frequent threatenings of inflammation, which, under these circumstances, continually occur, the combination of a narcotic with a sudorific appears particularly useful; and for this purpose the compound powder of ipecacuanha, in small doses, twice or thrice in the twenty-four hours, often proves a valuable medicine, strict attention being at the same time paid to the proper action of the bowels and kidneys. In this form of the complaint, however, I must not lose sight of the recommendation which is due to the combination of stramonium and lactucarium, from which I have repeatedly seen the best effects derived.

The improvement of the diseased and weakened limbs claims our particular attention.

It is in aggravated cases of the kind which I have now in view, that a system of tepid bathing will usually prove most useful; and that *Buxton* promises its greatest benefits.



From an observation of the effects of the Buxton bath during several seasons, I can with confidence recommend its powerful remedial influence for that chronic weakness of the limbs, attended with irregular pain, to which gout so commonly gives rise, and which is frequently mixed with rheumatism. It acts much more favourably as a tonic than the Bath waters; and I am convinced that a tepid temperature is always useful, and a high temperature is generally injurious to gouty parts, unless in those occasional, and what may be called extreme examples, in which some disease at the source of nervous influence, or the tyranny of gout exerted for many years, shall have produced that peculiar infirmity of limbs which is accompanied with a weakened circulation, and a considerable deficiency of animal heat. As a general rule of practice, therefore, I would consider the employment of a very hot bath objectionable, in the treatment of weakened limbs.

I was consulted by a gentleman crippled with gout and rheumatism, who, after fruitless trials of the hot bath, persevered for several months in the use of the vapour bath; but the limbs became weaker, and in no respect relieved. To him, morning sponging with tepid salt water, and diligent friction with a liniment moderately stimulating, have rendered great service.

From much experience, I can confidently recommend this method of treatment. It acts as a safe remedy in removing relaxation of the parts, and has an influence as a prophylactic. Simple rubbing will usually prove sufficient, except where the energy of parts is very defective; and, in that case, stimulating liniments will much assist the effect of friction.

In returning to the subject of Bath and Buxton, I

shall offer the following quotation from Dr. Heberden, respecting Bath\* :—

“ I have not been able to observe any good in arthritic cases from the external use of these waters, either when the distemper was present, or in its absence: on the contrary, it has rather appeared to increase the weakness of the limbs; and sea bathing has contributed far more to recover the strength of gouty persons; many of whom, in the intervals of their fits, have used it with safety and advantage.”

That the employment of sea bathing by a gouty person may sometimes be made with great advantage, is a truth that may be at once admitted; but I would restrain the prescription within very narrow limits. It appears to me that the plethoric state or tendency, which is so common to the gouty, should always be a point of careful consideration, in determining the propriety of using cold bathing. The circulation suddenly checked from the surface, may be unfavourably directed; and in proportion as plethora, or local congestion, or immediate tendency to gout, may be existing, the interference of so strong an agent as cold immersion must abound with hazard. Also, if the energy of the limbs be very deficient, the application of cold is not followed by sufficient reaction on the surface; and pains, as of rheumatism, may be produced.

A gentleman, aged 36, having with advantage used the warm bath three times a week, for five weeks, to relieve some chronic pains and weakness left in the limbs by a severe paroxysm; in the hope of finding a greater tonic effect from cold bathing, went into the open sea,

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\* Commentaries, p. 51.



with the interval of a day, repeatedly. He now experienced occasional pain at the pit of the stomach; tingling sensations in the ribs; some aching in the sciatic nerve of one limb, and, he says, "gouty pains flying all over him." He resumed the warm sea bath, and it agreed perfectly.

It is to be observed, that the temperature of the open hottest bath, at Bath, ranges from  $108^{\circ}$  to  $100^{\circ}$ ; of the Cross bath, from  $98^{\circ}$  to  $94^{\circ}$ ; and the temperature of the Buxton bath is stated to be  $82^{\circ}$ . Hence the action of the two waters, as remedies in the circumstances in question will be widely different. Some illustration of the power of the Buxton bath, in relieving a weakened and painful state of limbs induced by chronic gout, will not be uninteresting.

A gentleman, subject to rheumatism, was seized with gout in the great toe, only, in the first fit. In subsequent attacks, both toes and both ankles were affected. He had also sciatica on one side, and rheumatism in various parts, in connexion with the last paroxysm. All inflammation being removed, but harassed with continual pains, and such weakness in the joints, that he had the apprehension of losing the use of his limbs, he made trial of the common warm bath. It did not afford relief, and served only to increase the debility of the limbs. In this state he went to Buxton, and bathed regularly for seven weeks, with the happy result of a perfect cure.

Another gentleman, much crippled from chronic gout, and also affected with rheumatic pains, received a cure at Buxton in five weeks. He relates that he was not sensible of any material advantage, until about the fifteenth time of bathing.

A third patient had suffered severe gout in both feet, in the toes, insteps, and ankles. He had applied leeches



freely to the inflamed parts, with only slight relief; and considers that they led to the very serious œdematous weakness which he suffered long afterwards. At a distant period from the paroxysm, he was unable to walk for more than a quarter of an hour, without producing swelling of the feet, and much fatigue and excessive aching. In this state he visited Buxton, and by regular bathing, in rather less than a month, his limbs were perfectly cured. I am acquainted with cases in which the external and internal use of this water has, in about a week after its employment, excited a paroxysm; doubtless the gouty diathesis having been in particular force at the time.

A gentleman, much subject to gout, first visited Harrowgate, and made use of the sulphurous bath. Immediately very troublesome symptoms of gout appeared. When recovered, he made trial of the simple warm bath; but again the gout was produced. He then without delay went to Buxton, and from its natural bath derived every satisfactory result.

In the way of external treatment, Dr. Saunders has stated his opinion, that it is the *temperature* alone which can fairly claim the praise of being a remedy. If this idea be as correct as it seems reasonable to suppose that it is, a domestic plunging bath, affording the convenience of heated water, would be valuable to the gouty patient; and thus the imitation of Bath or Buxton, or the employment of any intermediate temperature according to the circumstances of the case, would be in the possession of those whose affairs cannot permit their absence from home. I am aware that this suggestion may appear more plausible than practicable, from the great expence which is attached to the construction of such a bath, with the suitable arrangements for maintaining the temperature of so large a body of water; but I offer the hint to the affluent.

It must be the patient's care to supply the many collateral advantages of the watering place, by a correct regulation of all his habits. The superiority which a spacious tepid bath affords over one that is confined, is obviously to be referred to the free motion, which allows the opportunity of using a low temperature during the immersion. It is, in my opinion, much to be regretted, that our sea-side watering places do not possess the convenience of a *plunging* tepid bath. In certain states of chronic rheumatism, and also of chronic gout, the invalid might probably derive still more benefit from the stimulus of the sea water with a proper temperature, than even from the Buxton bath. Notwithstanding that I support this idea as one which I think is worthy to be entertained, I must do proper justice to the merits of the Buxton water, in allowing due consideration to the opinions of those, who are convinced that as a bath it possesses a specific power of action, quite independently of that very material advantage which I have already mentioned, of allowing the patient the opportunity of moving about with free range, in a temperature which is a mean between the cold and the warm bath.

In theory it is difficult to imagine how the gaseous impregnation should act upon the surface of the body; and no credit of this kind can be given to its solid ingredients. Those who adopt this favourite view of its qualities being of a chemical nature, ground their conviction upon mere experience of its utility, and a comparison with the practical effects of other waters. I think indeed that the spaciousness of the bath, and the uniformity of its temperature, give it superiority sufficient over every other bath with which I am acquainted, for the relief of certain states of rheumatism, and of weakness of limbs, produced even by many other causes besides rheuma-



tism and gout. A scientific question, therefore, raised upon its *modus operandi*, does not endanger the fair fame of the Buxton bath.

I was consulted by a gentleman, who, together with chronic gout affecting the knee, was much distressed by wandering rheumatic pains. The latter yielded entirely to the Buxton bath; but in regard to the former complaint, he did not profit by its influence in any degree. Did not this result exemplify, how much less the rheumatism is necessarily connected with the constitution, than the gout?

Under the impracticable circumstances of procuring for my patient the advantages of a tepid plunging bath, I have on some occasions directed a shower bath, consisting of a saturated solution of salt, and raised to a proper temperature by the addition of hot water, to be allowed to fall on the affected limbs; and the result has been always more or less satisfactory. In this plan I have insisted on subsequent friction being very freely employed, as an important adjunct of the treatment. I think it material to suggest, that we should view any mode of bathing which may be adopted, as principally in the light of external treatment, and as a valuable auxiliary to internal means of management. I have seen some striking instances in which a course of bathing has alone been trusted, and the treatment of the internal organs having been neglected, either no material advantage has been procured, or a relapse has shortly followed. These observations are applicable to what I have found to result from the common warm bath, and also from the waters of Bath and Buxton.

A lady, entirely of the nervous temperament, after a severe paroxysm, made trial of a warm *sea* bath, with a view to improve the limbs. Her digestive organs were



still disordered; for no proper treatment had been pursued. The bath produced so much sense of tightness in the chest, and uneasiness of breathing, that she could not continue its use. It appeared comfortable in its effects to the weakened limbs.

A. S. aged 50, long subject to gout, when suffering from weakness of the limbs, and pains which appeared to be rheumatic, made trial of the hot bath at Brighton. After bathing a few times, a paroxysm of gout took place, which proved severe.

T. L. aged 52, first gouty at 35, experienced so much sense of debility and perspiration from using the hot bath once only, that he could not venture to repeat it. His muscles were previously relaxed, and his constitution generally was so deficient in tone, that it was an unfit remedy. He adopted it with a view to relieve some chronic pains of his limbs.

Another gentleman, under similar circumstances, found exactly the same effects.

I am acquainted with several instances, in which the use of the warm sea bath, without previous preparation, has excited a fit of gout.

R. S. aged 30; gouty since 24; when suffering from the sequelæ of a paroxysm, and affected with pains of the limbs, which appeared to be rheumatic, after a few times using the warm bath, found himself rendered feverish, the weakness of the limbs increased, and the pains not relieved. These examples are sufficient to shew the importance of considering carefully the state of the constitution previously to the use of so simple and innocent a remedy as the warm bath appears to be.

When proper constitutional treatment has been premised, the use of the warm sea bath often proves a most successful remedy; but a greater perseverance may be

necessary than the patient is prepared to expect; and I have known it happen, that, although the remedy has agreed, no apparent benefit has begun to appear, until two or three weeks have elapsed; and yet afterward the best effects have been obtained.

Of the good effects of the Leamington warm bath the following is a pleasing instance:—A gentleman having suffered from gout severely, was left very lame, with much stiffness in the joints, and rigidity of the muscles. After bathing two or three times, his improvement was so satisfactory, that he walked almost without difficulty.

The vapour bath is a remedy of considerable power, and should not be inconsiderately employed\*. I have known some gouty persons derive much benefit from it; and others have experienced inconvenient languor, and increased susceptibility to the changes of the atmosphere,

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\* The vapour bath at Brighton appears to be increasing in its reputation. I do not doubt that the effects of this bath, as well as of the warm bath, are obtained with much greater advantage at a watering place, where the patient devotes himself so much more to the care of his health, than when at home. Also the favourable influence of the sea air is to be taken into the account. As regards the actual qualities of the vapour, whether it be procured from sea water, plain water, or impregnated with sweet smelling herbs, I am not aware that any difference exists. I know by experiment that the muriates in solution do not become decomposed at the boiling temperature. The transparency of the condensed vapour is but just perceptibly affected by the nitrate of silver; no salt comes over in the vapour; and hence it follows that the remedial influence of the bath must be referred to temperature, and to moisture applied to the whole surface of the body, in a way more effectually calculated to act as a relaxant to the different textures than the ordinary bath; and in many cases this must have its advantage.



from the great perspiration which it has induced. This result has happened chiefly to the corpulent invalid. Most persons, however, I am willing to allow, do not complain either of debility, as a consequence of a free use of the vapour bath, or any increased liability to take cold. It proves most useful in cases of stiffness of joints, and muscular rigidity, and tendinous contraction, which may have been caused either by gout or rheumatism. Also it often affords material relief in chronic rheumatism. In proportion as the solids are relaxed, and the muscular fibre is weak, I should dissuade the patient from the trial of the vapour bath, as a constitutional remedy; although in such an individual, if there be the state of local complaint which I have just described, it may with every propriety be locally applied.

In those cases of chronic gout, in which, from neglect or *mal-treatment*, the flexor muscles of the limbs have so much overpowered the extensors, that a permanent contraction of the muscular fibres, with a rigid and contracted state of tendons, becomes the consequence; a distinct mode of treatment is rendered necessary.

When I reflect on the examples of miserable lameness, of youth rendered almost helpless, and the middle age of life made decrepid with infirmity, which have repeatedly come under my observation, as the consequence of neglect or improper treatment of acute and chronic gout, I feel that I cannot too impressively recommend an attentive professional management of the paroxysm; or dwell too much on the importance of the method of practice, of which I am now about to speak, when such management has been neglected, and the consequences just described have been produced.

We find in some of these cases that the just antagonist action of the muscles is quite destroyed; and the patient



if able to walk without the help of crutches, moves at right angles with his arms and legs, awkwardly bending forwards to lessen the superincumbent weight on the knees and ankles. He also walks chiefly on the heels, and with the appearance of fear and uneasiness. The extensor muscles are found relaxed and small; the flexors also small, but rigid and contracted. The legs, and particularly the feet, are much affected with coldness, and the languid circulation in the extremities is often apparent from the blueish colour of the skin. The bursæ mucosæ in different situations are distended and tender, and occasionally are much enlarged. This happens chiefly at the ankle joint, around the knee joint, in the ham, and at the tuberosity of the os ischium. The ligaments are thickened and contracted, and very tender; the tendons are rigid and hard; and from these causes, according to the degree in which they prevail, the lameness is general or partial; and, according to its duration and other circumstances, is very tractable under attentive management, or admits only of some amelioration.

The usual modes of bathing, either warm or tepid, seldom afford any advantage, and in some instances appear productive of increased infirmity. It is indeed in the rubbing process, which was first instituted by Mr. Grosvenor of Oxford, that the only method of cure for these cases can possibly be found. It is in vain, as I have seen in three examples, that the powers of electricity are employed upon the languid limbs, or blisters, or any stimulants. I have the satisfaction of stating, that in many very urgent cases in which various other active means have been unsuccessfully tried, I have procured the most decisive advantages from instituting this treatment\*. It

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\* In this metropolis there are persons properly instructed in this process; and who attend on very moderate terms of remuneration.

will be readily imagined, that much time and perseverance are required to give due effect to the plan; and I must also add, that most commonly, in addition to it, internal means of treatment are indispensably required. The regular plan of friction will be found usefully assisted by morning sponging with tepid salt water; by the use of rollers when œdematous swelling, or a varicose state of the veins are attendant evils; and where a want of energy much prevails, by the use of a liniment at night; or night and morning.

I must in this place observe, with regard to rollers, that, if ligamentous rigidity be the chief inconvenience which exists, they prove rather injurious than useful; by restraining, in some degree, the sphere of motion in the joint, which is already too limited.

I was favoured, two years ago, with the following interesting communication by Mr. Davis, who having received the early part of his professional education under Mr. Grosvenor, is highly competent to appreciate the value of the method of practice now under consideration.

“ In May 1815, A. B. came to town in consequence of having had the gout repeatedly during the last year and a half, in both knees and ankles, which had produced an enlargement and distension of the bursæ mucosæ of the knees, a contracted state of the flexor muscles of the limbs, a peculiar rigidity of their tendons, and an enlargement in one knee below the patella on each side, giving a *sensation* to the touch very much resembling that of cartilage. There was a great degree of weakness and stiffness of the ankle of that limb, with a considerable thickening about the tendo-achillis, at the point of its insertion into the heel.

“ The patient, from having totally lost all power of

moving the knee joints, was unable, without the utmost difficulty, to move about the room, even with the aid of crutches.

“ Manual friction was applied regularly for one hour and a half in the morning, and again for the same length of time in the afternoon, to the lower extremities, particularly from above the knees downwards. This produced a gradual improvement, and after the continuation of this plan during ten weeks, the weakened limbs acquired their usual tone and powers of motion ; and the joints assumed nearly their natural appearance.

“ Previously to the patient’s having recourse to friction, he had drunk the Buxton waters, and used the warm sea bath for several weeks, without the smallest benefit.

“ During the time the friction was applied, he had no return of gout ; and since that period, July 1815, he has had only very slight attacks.

“ He was first attacked with it at the end of the year 1813 ; and till that time had enjoyed robust health, and was possessed of great activity.

“ The paroxysm, which chiefly led to the lameness in question, arose from his exposure to cold and moisture for several hours, after having been over-heated by violent exertion.

“ The acute stage of the disease lasted several weeks, during which time he was kept in bed, and subjected to the influence of stimulants, with his joints enveloped in flannel.

“ On the abatement of the gouty inflammation, the joints of his lower extremities remained very weak, particularly the knees ; and upon the least exposure to cold, or upon any irregularity in diet, there re-appeared some



slight gouty inflammation, which in the end reduced the patient to the situation already described.

“ Here then is a striking instance of the beneficial influence of friction, properly applied to parts of which the energy and action has been destroyed by the gouty inflammation. I say *properly* applied, because I have had reason to believe, that if the friction be used before the inflammation has subsided, or if it be applied too violently, it brings back the gouty inflammation, instead of producing the salutary effects above mentioned.”

In my own experience with the effects of friction, and this has now been very considerable, I have found it essentially necessary to join with the plan, an alterative course of medicine ; and, without which, gouty inflammation would be certainly excited. Indeed the local weakness is sometimes so nicely balanced between simple debility, and tendency to inflammatory action, that much caution is required in the use of friction and stimulants.

In many instances it is more prudent to premise the use of medicine for a short time to the plan of friction.

The patient must be apprised, that for a day or two, the parts which have been rubbed, will have the feeling of being bruised, and probably the general lameness will be increased ; but these consequences are only of a transient nature, and are not to be regarded.

In the list of cases of chronic gout which I purpose to offer, I shall relate some instances of the success of friction, in restoring the patient from the most discouraging condition of lameness ; the local plan being assisted by corrective medicine. To these cases, therefore, I refer the attention of my reader.

In minor cases of complaint affecting the limbs as the

consequence of gout, more partial and also more simple treatment will prove sufficient.

When the bursal distensions are tender and painful, the application of soap plaister, spread on leather, is much to be recommended, in addition to moderate bandage. In those gouty enlargements around the joints, which to the eye appear as the growth of bone and cartilage, but are really produced by the morbid changes of the ligamentous, bursal, and tendinous textures, and a distended cellular membrane, the use of blisters might appear to be indicated; and they have been recommended by several authors\*.

In one case, corresponding with the description which I have just stated, I made a full trial of this treatment; blistering the parts several times in succession. The result was much less favourable, than the united means of sponging, friction, bandage, &c. employed in other cases; and it must be allowed, that the irritation of a painful remedy (in gout especially) should be avoided, when it cannot be compensated by considerable advantage from its other effects.

I am informed of a few instances, in which the application of blisters to the knees has diminished the bursal distension, so as to give some relief to the habitual lameness. I consider, however, that this treatment is much more suitable to the effects of rheumatism than gout.

In the foregoing arrangement of my present complicated subject, I have entirely excluded those anomalous forms of sympathetic disorder, in which many slow and varying symptoms take place in persons who have never

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\* Musgrave, &c. Dr. Rush speaks of the employment of blisters, both in acute and chronic gout, with much approbation.

had any evidence of gout; and in whom, from suspicion alone, or loose analogy, and from a desire of removing the appearance of obscurity, by imposing a name, the appellation of gout has been given to the disease. Having before stated my objections on this head, I proceed to the detail of a few cases in further illustration of the theory and treatment of chronic gout.

### CASE I.

M. P. aged 60, tall, robust, has a circular chest, is very corpulent, and a perfect example of the plethoric habit; of sanguineo-nervous temperament; irritable disposition; accustomed to all the luxuries of a life of indulgence; and with a full diet uses only passive exercise, although he divides his residence between town and country. Gout unknown in his family. He was first seized at the ball of the great toe, at the age of twenty-four. He has occasionally had feverish attacks, with sore throat; but gout has been almost his only disease. It has scarcely spared any part of the upper or lower limbs; and has produced such a weakness of ligaments, rigidity of tendons, distended bursæ, and thickened aponeurosis, that, in the feet especially, permanent tenderness and lameness are established. To some of his acute attacks, improperly treated, alarming œdema has succeeded; and harassing perspirations have worn the powers of the system, and seriously interrupted his convalescence.

Of late, this gentleman has seldom experienced an acute fit; but chronic symptoms, which now and then have a transient violence, return at no distant interval in



the year; and, though inflicting less misery than formerly, considerably embitter the enjoyment of life.

I visited this patient in June 1814. The knee was the part most affected. There was much bursal swelling; the skin was tightly stretched, very tender to the touch, inflamed, but not discoloured. He had no ability of locomotion. The feet were a little swollen, and not wholly free from inflammation, and were troubled with shooting pains. He complained of lumbago; and stated that this attack, which had now been of some duration, was excited by exposure to cold. The skin was temperate; but the pulse was 100, with an irritable beat. The tongue was furred, a feverish thirst was present, and all relish for food was lost. The urine was scanty, high coloured, and depositing much pink sediment; and the bowels were inert. He had taken occasional small doses of calomel, but without the addition of purgative medicine, so that no effectual benefit had been obtained.

The following draught was directed three times a day:

R. Magnes. ʒss.  
Aquæ menthæ viridis, ʒx.  
Aceti colchici,  
Syrupi auranti, āā ʒj.  
M.—Fiat haustus.

The lotion, p. 272, was applied constantly through the day; and at night the affected knee was covered with soap plaister. The diet was chiefly diluent for two days; but afterwards solids and a little wine were permitted. The bowels became actively excited; the kidneys soon secreted abundantly; and, at the end of a week, he was

so well recovered, that he undertook a distant journey with but little inconvenience.

With a view to the permanent health of this patient, a more attentive regimen was necessary than he would contemplate with satisfaction, or was willing to obey. He acknowledged his present cure with entire approbation, and promised to observe many good rules; which I fear, however, were only imperfectly followed. The secreting functions doubtless required watchful attention; and, as in every other instance of a plethoric habit, all the best means of prophylaxis were imperiously demanded. I am unacquainted with any late particulars of this case; but I learnt that the gout did not soon return.

## CASE II.

*February 10th, 1815.*—As an example of the chronic symptoms of gout connected with serious visceral derangement, the following detailed particulars appear to me instructive:

A. L. aged 49; a publican; of the middle height; circular chest; very corpulent, with bloated countenance; of sanguineous temperament; extremely plethoric; veins large and full, and, in one leg particularly, varicose, with some blotches in the skin; a very free liver both in eating and drinking; his liquors, porter, ale, and gin. Has had gravel occasionally, and is much subject to painful hæmorrhoids. His first attack was at the age of forty-two; and he remained exempted from a return for six years. During this period he did not attend to regimen; but states that he had a regular state of bowels, and very frequent hæmorrhoidal discharge.—

*Since*, both these circumstances have been much reversed. Gout unknown in his family. The second attack, twelve months ago, affected the same knee as before, and that part only. Six months since, the ball of the great toe in the right foot was severely attacked. In this last fit, first the right foot, then the left, and lastly the right foot again, after appearing to be recovering, have undergone severe gouty inflammation. The fit had been excited by walking, insufficiently protected, on wet ground, and remaining many hours with damp stockings\*.

Both feet are œdematous; the skin is yet slightly red; but this colour vanishes for some little time on pressure; and he is now rather troubled with aching than severe pain. He can with difficulty walk. He is occasionally threatened with a return of active inflammation, having throbbings and prickings in the parts; and cramps in the legs, which harrassed him much at the commencement of the acute symptoms, are still troublesome.

The pulse is full, beats strongly, and in frequency 90. The skin is rather hot, and very dry; the tongue is much furred; appetite is lost; the bowels are irregular, but for the most part costive, with foul, blackish, and slimy fæces.

He complains of tenderness, on pressure, in the right hypochondrium, and at the epigastric region, and more

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\* This patient does not remember to have had warning sensations of a fit; but, on the contrary, has usually gone to bed on the night of attack with the ordinary feelings of health. He states, however, that for some time previous to a fit, he has perceived an increase of abdominal corpulency; has had a costive state of bowels, and a deficient secretion of urine.



especially just at the ensiform cartilage; but I do not discover any visceral enlargement. The urine is scanty, and immensely loaded with pink and mucous sediment. It reddens litmus paper; it contains an excess of urea; is not rendered turbid by nitric acid or heat; its specific gravity 1.028 (see Experiment iii. p. 129). Four ounces afforded of phosphoric acid 9.2 grains.

In addition to this derangement of the natural functions, and morbid state of secretions, he has a violent cough with oppressed breathing, from which he has suffered many weeks. Expectoration is copious, but does not give relief. The chest is tight and painful, and has the sense of much weight. If he stoops, he is constantly seized with an alarming spasm across the diaphragm. On the evening which preceded this fit of gout (invading him in the night), in a paroxysm of coughing he fell on the floor, and for several minutes was insensible. He rejected from the stomach much acid and bilious matter, with relief. Now, on coughing, he frequently becomes black in the face. Each night he is distressed with night-mare and frightful dreams; and in the day is sensible of much fulness in the head, with occasional pain. A severe state of hypochondriasis is present.

In this case, every indication presented itself of an overloaded circulation; demanding active depletion. I shall offer a brief recital of the treatment which was adopted. No remedies had hitherto been used.

℥xvi of blood were taken from the arm. Two grains of calomel, the same of antimonial powder, and eight of colocynth extract, were directed each other night, and the draught, p. 198, twice or thrice in the day, accordingly as the bowels should be affected. In the local treatment, I was contented that each morning the skin should be well sponged with tepid salt water. The diet

wholly unstimulating, and to consist of milk in any form, vegetables, and puddings.

Immediate relief was felt from the loss of blood, which was sizy and cupped; and evident advantage also followed the purgative and diuretic action of medicine. Three days after, all the signs of fulness being still urgent, the bleeding was repeated to the same extent as before; and, the cough being violent, a large blister was applied to the chest. The medicines before prescribed were continued till the end of ten days.

The gouty pains of inflammation quitted him within a few days; but œdematous weakness, occasional aching, and transient shootings, remained troublesome. The system having now been considerably relieved, I judged it right, with a view to the strengthening of the limbs, to employ a moderately stimulant liniment, friction and rollers, in addition to the morning custom of sponging.

The kidneys, which at first seemed sufficiently affected by the medicine, now required more excitement by means of stronger diuretics. Ten drops of the tincture of digitalis were added to the draught. In the pill, half a grain of extract of elaterium was substituted for the antimonial powder.

At the expiration of a fortnight much relief was obtained, but many symptoms also remained. The oppression of the chest was sensibly lightened; but the fits of cough, although less frequent, were violent, and the head was full and uneasy. *Nightmare* was abated.  $\text{℥xiv}$  of blood were removed by cupping at the neck. An opiate squill mixture was prescribed to be taken occasionally. The gums being rather sore, mercurial medicine was suspended. The action of the bowels and kidneys was continued by the effects of the draught twice a day, and by a pill containing two grains of digitalis, a quarter of a



grain of elaterium, and half a grain of opium, each night. The appearance of the fæces improved, and the urine was now and then light and clear, and of lessened specific gravity; but occasionally also it returned nearly to its former state.

At the beginning of March, the patient's situation was materially different. Appetite and the relish of food were fast returning. Sleep became for the most part tranquil and refreshing. Cough only occasionally urgent, and the breathing easy. The complexion was strikingly changed from a dark yellowish hue, to returning healthy clearness. Much amendment of spirits. The secretions were most favourably changed, but were not arrived at the just standard. Tenderness was still felt, in a slight degree, at the epigastric region towards the right side. In reference to this, 3ss. ungu. hydrarg. fort. was directed to be rubbed in upon the part, each night, until the gums should again become just sensibly affected. An aperient bitter was prescribed twice a day. Light animal food, with table beer, was permitted each other day, in compliance with the urgent entreaty made for restorative diet. The limbs were at this time quite recovered.

In ten days the gums were a little tender, and the mercurial friction was again suspended, as also all other medicine. Air and exercise were advised each fine day. In another week the whole treatment was resumed.

At the middle of April he was recovered, and had the look, together with the feelings, of cheerfulness and health.

I now made a comparative examination of the urine. It was of a light amber colour, without any other sediment than the usual mucous cloud. Its specific gravity 1.0168. (See Exp. iv. p. 129.) Four ounces afforded



of phosphoric acid, 2·97 grains. The quantity of urea and uric acid was also lessened, and apparently in the same relative proportions as the phosphoric acid. The bowels were regular, and the fæces bore a healthy character.

I directed him daily exercise, with a regimen of careful moderation, and that he should strictly abstain from malt or spirituous liquors. He was permitted two or three glasses of sherry daily. The limbs were to be treated with salt water in the usual manner. Costiveness to be carefully obviated by the pill, p. 303; and upon any evidence of vitiated secretion from the bowels or kidneys, five grains of compound calomel pill to be taken at bed time.

In this very urgent case, the efforts of Nature in producing a fit of gout had not apparently relieved the system. At one juncture apoplexy was strongly threatened; and for a considerable time, the evident congestion in the lungs was endangering a rupture of the vessels.

The tenderness at the hypochondriac and epigastric regions; the spasm of the diaphragm on stooping; the continual fulness of the hæmorrhoidal vessels; the dark alimentary secretions; were strong marks of obstructed liver, and of congestion in the circulation of the system of the vena portarum. From these united causes, the head was much affected, and the nervous system was seriously disturbed.

The comparison in the state of the secretions under the disease and at the return of health, and of the remarkable difference in the saline and animal principles of the urine, is worthy of attentive observation.

I saw this patient again, *Feb.* 1816. He reported that he had passed through the summer in perfect health, and

entirely free from cough. He became tired after a few months of restraint of diet; and returned to the free indulgence of porter, and probably other liquor. At the return of winter, some cough again occurred. He had been free from all threatening of gout. His erroneous habits were producing plethora. He complained of cough, occasional heat of stomach, and attendant headache. Doubtless without entire reformation of habits, his former symptoms will all return; and that establishment of health, which care and prudence might ensure, will be effectually prevented.

### CASE III.

A lady, aged 57, plethoric, but of the nervous temperament, has been subject to gout for eleven years past. About twelve years ago, she suffered continued uneasiness in the left side, which sometimes amounted "to a peculiar burning as if an abscess were forming." From the increased bulk of the part, which she describes to have taken place in a short time, and the copious dejection of dark blood from the bowels, which occurred occasionally, my presumption is that the spleen was in a state of congestion and chronic inflammation. The stomach suffered by sympathy; but in addition to ordinary sickness, she sometimes vomitted dark blood. She says, "that she received delightful relief from being cupped freely on the side." She has for many years past had hæmorrhoids, attended with frequent and considerable hæmorrhage. Has been much subject to pain and confusion of the head, with excessive sense of weight. Often dyspeptic, and subject to depression of spirits. Has suf-

ferred gout in almost every part; and many of the attacks have been induced by very slight causes.

At my first visit, I found this patient under a severe attack of gout, affecting both feet and both hands. It had been induced by accidental exposure on a foggy day in November, with the wind in the east. The affected parts were vividly red and much swollen. She complained of violent throbbing, and severe cutting and pricking sensations, and frequent cramps. Her looks were expressive of great anxiety and suffering. The complexion was jaundiced. The left side was tender to pressure, and there was evident visceral fulness. A troublesome cough was present, and the respiration was uneasy. Appetite was lost, and the stomach was much affected with flatus and with occasional sickness. The matter rejected, she described as either yellow or green; and that as one or the other prevailed, it was more sensibly bitter or acid. It was excessively slimy. I saw a portion, which had so much the appearance of pus, that I was curious to give it attentive examination; and found it to be very concentrated mucus\*. The urine most

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\* I used the ingenious method recommended by Dr. Young (Introduction to Medical Literature, p. 546), for the distinction of pus and mucus, of viewing the suspected fluid through pieces of plate glass before a candle; concluding it to be pus if a circle of coloured rays should appear, and vice versa. In this instance I found the test satisfactory, for no coloured light was produced; but I must observe, that our inferences must be carefully drawn, when we do find that the secretion from any surface, internal or external, exhibits the coloured rays. It is familiarly known, that a mucous membrane under disease, produces puriform secretion, when there is no breach of surface. We see this in



commonly deposited pink sediment, and the state of the bowels was such as also declared a morbid action of the liver.

In addition to the particulars already related, she mentioned that in the winter season she usually felt "as if she had rheumatic pains all over; and that the cramps and other uneasy feelings of her stomach and side were most troublesome when the limbs were the most comfortable; and the reverse, when gout was in the limbs." I learnt that to a degree of extraordinary idiosyn-

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gonorrhœa, and also in the expectorated secretion which attends many kinds of cough either recent or chronic; and which, in its appearance, often alarms both the patient and the practitioner. I have repeatedly found the expectoration attendant upon an alarming cough so entirely puriform in every character, that the lungs had been considered in a dangerous condition of disease; but perfect recovery took place. Hence we are taught to derive our judgment from the associated constitutional symptoms, and not from the suspicious nature of what is expectorated. It is not generally known, how readily a mucous membrane under irritation takes on the morbid action of which I am treating. I have examined the secretion of the conjunctive membrane of the eye, when under very slight inflammatory irritation; of the Schneiderian membrane under catarrh; and of the urethra when affected by gleet; and have discovered by the optical test, a slight degree of the coloured rays. The circle of rays appears more distinct, and the colours more vivid, in proportion as the substance is of the true nature of pus; or, to give the philosophical explanation, accordingly as it consists of globular particles, by which the light is refracted. A chemical test for the distinction of pus and mucus, is yet a desideratum. At present, we do not possess any which is useful; and until such a discovery is made, the optical method claims our preference.

crazy, she would be affected to salivation with a small portion of mercurial medicine, if repeated thrice or even twice *at short intervals*. She was equally sensible to the power of opium over her nerves, and declared that she would rather endure any pain than take composing medicine.

I shall avoid the details of treatment in this case, which would be tedious; and confine myself to a general account. From the draught, p. 198, in regular use, an occasional pill of hydrarg. submur. et pulv. Jacob. together with the free use of the lotion, the inflammatory symptoms were soon and most favourably removed. Pain and spasm were also controuled by pills of the stramonium extract and lactucarium, which did not prove in the least degree inconvenient to the nervous system. The side was relieved by blistering; and unless this had succeeded, the aid of cupping would have been added. After a period, with a view to strengthen the stomach, the draught, p. 286, in effervescence with lemon juice, and the pills there mentioned, were prescribed; but so repugnant was the system to tonics, that it could not be taken without some consequent heat and irritation more than once a day; and it was therefore continued only at noon; the pills or the colchicum draught being taken each night; and the mercurial pill about every fifth night. If repeated with more frequency, I had the proof that mercurial fever and irritation would ensue. The weakened limbs, when no longer affected with inflammatory tenderness, were treated with the morning sponging, diligent friction, and rollers, and a liniment occasionally, with the best effects. Ass's milk formed a part of the regimen. I have the pleasure to add, that, at the end of two months, the patient was very favourably convalescent from all the symptoms; and acknowledged a state



of radical improvement, and of acquired spirits, strength, and comfortable feelings, which she had not permitted herself to expect.

In the following cases I shall endeavour strictly to confine myself to the most interesting details.

#### CASE IV.

J. P. aged 44; corpulent and robust; plethoric; of the mixed temperament; first affected with *acquired* gout at 36; has suffered most severe fits, never less than once, and sometimes twice in a year; was subject also to painful attacks of gravel until he discontinued the use of ale. He had been suffering from chronic gout, and gave me the following account of his case when he consulted me in March. In the preceding October, he received a fall from a horse, by which his right arm was so much strained and bruised, that it became immediately discoloured throughout, and extremely tender. The gout had been hanging about him for a week. He was bled; took purgative medicines; and twelve leeches were applied to the arm. In two days after the accident, gout attacked the right foot very severely; and, in succession, the left foot, the right and left knee; lasting three weeks. In the injured arm no gout took place; and the painful sensations which had before troubled him in this part, now ceased to engage his attention, so severe was the suffering from the gout in the lower limbs. Through November and December he continued very lame; his feet and ankles swelling, and being very painful after slight exertion; often losing his sleep at night from actual pain of some part affected with sudden gouty inflammation; or from distressing starting of the limbs, or



agonizing cramps. In January he obtained a temporary amendment by the use of Reynolds' specific; but he relapsed in February; and, in addition to the gouty state of the feet, he was tormented by rheumatic pains in the loins and arms; was occasionally affected with a spasm of the diaphragm, which he described as the cramp of the stomach; he was hypochondriacal in a high degree. I first saw him under these circumstances, and found the tongue furred; the appetite capricious; the bowels for the most part confined; the fæces clay coloured; the urine scanty and depositing pink sediment. I directed the feet to be sponged very thoroughly four or five times a day with the lotion, till inflammatory tenderness was removed; small doses of hydr. submur. pulv. Jacob. et extr. colocynth. comp. each other night; the saline form of the draught, p. 198, twice a day; pills of pulv. ipec. compos. with lactucarium twice or thrice a day as pain might prevail; and a moderately supporting diet. From the moment that this treatment was commenced, his amendment was rapid. The active alterative just mentioned, was, after a short time, exchanged for the pilula. hydrarg.; the draught was administered in the first of the morning only, and followed by some ass's milk; salt water sponging, and friction in the morning, and the liniment, p. 291, at night, were substituted for the lotion. In one month, the patient was, in every respect, perfectly and satisfactorily recovered; no occasion having arisen for the use of tonic medicines.

## CASE V.

V. R. aged 51; slight; of the mixed temperament; highly irritable in constitution; first affected with *here-*

*ditary* gout at 26, and has suffered of late years a severe paroxysm both in spring and autumn. The pain has often been so severe and continued, that he has been deprived of sleep for eleven days and nights. The premonitory symptoms, cramps in the calves of the legs; great irritability in the general state of the constitution; restlessness; head-ache; furred tongue; loss of appetite; confined state of bowels; and deficient secretion of urine. When this gentleman consulted me, he was affected with gout in the hand and elbow, and the chief attendant symptoms were such as I have now described. He informed me, that, in the course of the preceding twelve months, he had been six times very painfully attacked with gout, which he had unsuccessfully treated with Wilson's tincture; and, latterly, he thought his stomach and nervous system much injured by that medicine. I never witnessed a more irritable habit. Palpitation of the heart affected him on slight occasions during the state of gouty diathesis. He remarked, that sometimes the skin has been so morbidly sensible, that upon touching any very cold substance, little bladders have immediately arisen. From agitation or slight bodily exertion, he was affected with faint perspirations. The tongue was furred and very white. The urine deposited a sediment consisting of the phosphates. The fæces were knotty and clay coloured. Antimony, in the smallest doses, had been found always to disagree; and few purgative medicines had suited his stomach. He was delighted with the excellent effect of the saline form of the draught, p. 198; and a pill containing hydr. submur. half a grain, and pilul. hydr. gr. iv, given each other night, agreed perfectly. For the relief of pain and restlessness, he took, with success, lactucarium, together with a dose not exceeding two grains of pulv. ipec. comp. which was occasionally re-



peated in two or three hours after being in bed ; but more commonly a single dose proved sufficiently sedative. A poultice, with the lotion, and its use also by means of sponging, proved very successful. In this case, I preferred such modes of applying it, to the plan by linen compresses. Ass's milk was an useful auxiliary, causing the draught to act more pleasantly both on the bowels and kidneys. When the inflammatory symptoms were entirely overcome, I resorted to such treatment as was most calculated to improve the strength of the constitution, and restore the weakened limbs. The lower extremities were quite disabled by debility, induced by the previous neglect of all proper management. Friction for an hour daily, with the other means so often mentioned, produced the best effects. The only form of tonic medicine which could be taken without stimulating and heating effects, was the infusion of columbo, with the carbonate of soda, and the addition of lemon juice, at the time of taking it, in the manner of a saline draught in effervescence. To conclude, this gentleman recovered and retained a state of constitutional health and spirits, and strength and ease of limbs, to which he had, for the previous two years, been a total stranger.

## CASE VI.

The subject of the following interesting case, was a medical gentleman, to whom I had the satisfaction of advising a successful mode of treatment. I shall offer an abridged statement of his own observations.

J. W. aged 45 ; short ; of middling bulk ; of the nervous temperament ; first affected with *acquired* gout at 21, in the instep, and which was treated by mistake as a sprain. Till within the last two years has been attacked



at short intervals; and sometimes one severe fit has followed another, with the respite only of a month. The hands, feet, knees, elbows, and hip joints, have all been affected. The usual first notice of an attack was a pain on leaving the bed in the morning, which quitted him as the day advanced, and by means of taking his usual exercise; but returned about seven or eight in the evening, and continued till nearly the same hour in the morning. Inflammation immediately succeeded. "To describe," he says, "the violence of the pain, is impossible. It was attended with a sense of weight, wrenching, gnawing, burning, and as if some one were beating the parts with a large hammer; and, in short, no torture can be imagined more severe than that which I suffered. The pulse was quick, the tongue furred, the bowels torpid, the kidneys at first active, with a copious discharge of clear urine for the first day or two; then scanty, high coloured, and depositing abundantly the pink sediment; the spirits much depressed, and with so much nervous restlessness, that I could not bear the approach of any one near me. With the continuance of the fit, the stomach became extremely irritable, and often affected with violent retchings. Cramps were severe, particularly at night, together with watchfulness and delirium. The duration of the fit was usually three weeks without any intermission of suffering, either day or night. As the attack sometimes commenced without notice, so it quitted as suddenly; leaving much general exhaustion, and great stiffness and tenderness of the affected joints. As soon as the pain subsided, the state of the secretions improved, but did not become healthy. The appetite was voracious, and much sleepiness prevailed. It commonly happened that a relapse followed in a fortnight, and which sometimes gave rise to symptoms equally, or, if possible, more severe

than in the previous attack: but their duration was shorter, and the convalescence more rapid." In regard to the treatment, he had made trial of calomel to the extent of salivation, and ordinary purgative medicines; with the local use of leeches, fomentations and embrocations, without relief to his sufferings. From Wilson's tincture he procured present ease; but the gout so quickly relapsed, that he was dissatisfied with its effects; and two years ago, under a protracted state of sufferings, he resorted to the combined method of treatment which I advised. In reporting to me lately the effects which it produced, he says, "I am happy to inform you, that the plan succeeded beyond my most sanguine expectations; and, from that period to the present time, I have never lost two nights' sleep from the gout." He mentions that he has made a comparative trial of the draught as described at p. 198, with and without the acet. colch.; but that the omission of this ingredient most materially lessened the good effects of the medicine.

### CASE VII.

C. L. aged 53; slight; of the nervous temperament; first affected with *acquired* gout in the ball of the great toe, at 50; and since, in both feet on three occasions. I found him suffering from a chronic state of gout in the feet; and alarmingly ill with an urgent cough, copious puriform expectoration, a quick pulse, some degree of hectic fever, and a countenance which bore a consumptive stamp. On the day of my first visit, some urgent business had called him from home, and he was accidentally exposed to wet. He was subject to a severe cramp at the pit of the stomach from slight causes; and on the night



following to this exposure, he was seized with this distressing symptom, having been in bed about three hours. It continued a considerable time. He described the sensations which followed the first sudden seizure of pain, as the feeling of weight and coldness like that which might be produced by a piece of freezing ice; or at another time, when the weight was more oppressive, as if cold lead were forced into the stomach; and the aching was severe. Repeated draughts of warm brandy and water afforded relief; but, in case of its return, I directed a mixture of camphor, æther, and opium. On the succeeding night he was attacked in a similar manner. The first dose of the mixture contained fifty drops of the tincture of opium; and two succeeding doses, which were taken with intervals of half an hour, fifteen. This quantity completely removed the pain. It returned slightly on the next night, but yielded to a dose of the mixture containing thirty drops of the tincture, and never after returned. The cough and attendant constitutional disturbance now engaged my attention. The alvine secretions were such as to mark a very unhealthy condition of the liver. The saline form of the draught, p. 198, pills of pulv. ipec. comp. et lactucar, and a mild dose of calomel each other night, answered my utmost wishes. For ten days I avoided any treatment to the feet, which continued to be affected with chronic gout, and which had not alternated with the condition of the stomach already described. I feared that any application, however cautiously made, might incur the imputation of causing some internal inconvenience. At this period, however, the ankles being œdematous, tender and aching on the least exertion, I employed, in succession, the lotion by means of frequent sponging, the tepid salt water, and the stimulating lini-



ment. The best effects resulted, and not the least disadvantage to the constitution arose. This gentleman completely lost all his symptoms, with the exception of a slight degree of habitual asthma, in the space of six weeks. I never witnessed such threatening symptoms of phthisis in connexion with gout, as in this instance, yielding so perfectly to treatment. An interval of a year has now elapsed, and the patient has remained well.

### CASE VIII.

L. M. aged 50; corpulent; plethoric; of the mixed temperament; was first affected with *acquired* gout four years ago, at the ball of the great toe. I found him suffering from chronic gout, and that the symptoms had continued in each foot, alternately or together for two months. He had refrained from any treatment, from an idea that the gout was a disease which would cure itself; and from some apprehension connected with the recollection of an irregular action of the heart, which occurred a few years before; an account of which I shall state in his own words. "So well as I can remember, the irregular action of my heart, and consequently irregular pulse, came on in the year 1811. I cannot say that it was really palpitation, nor was it in the least painful; but from a peculiar sensation which I felt in my left breast (always there and no where else), I could tell every beat, or rather the want of beat in my pulse, as plainly as possible. The sensation was like that produced by a small electric spark. This symptom, without any variation in the sensations, continued till September 1814; when, for the first time, I had a week's fit of the gout. I had tried various medicines for the relief of the heart, without the least success. I took particular notice, that on the very evening when

my gout first came on, the feeling which I had in my left breast (and from which I could plainly tell the missings of my pulse without examining it) entirely left me; and my pulse became quite regular, and has continued so to the present hour, September 1818." This gentleman attributed his singular indisposition to the suspension of his former active exercise on foot and on horseback; so that he became more corpulent, and full in habit. In regard to his chronic state of gout, I found that the symptoms had been supported by congestion in the abdominal viscera, and an unhealthy condition of the secretions. The aperient and alterative treatment, with regulated regimen, perfectly succeeded; and the limbs were restored by the usual plan of proceeding, which I have detailed in other cases.

### CASE IX.

About a year ago I was consulted by a gentleman, aged 44, who, together with occasional painful fits of gout, the first of which occurred at the age of 38, was subject to very painful attacks of head-ache; and for four years past had been sensible of an irregularity of pulse, which prevailed, more or less, constantly. The symptoms premonitory of gout, were, cramps in the legs, acidity of the stomach, confinement of the bowels, a scanty secretion of urine, and a deposition of pink sediment. The stomach was exquisitely sensible to the influence of acid, so that he never could eat even a ripe orange with impunity. The feet were habitually very cold, unless when taking strong exercise. He mentioned, in regard to the head-ache, that on the day before, he felt a depression of spirits, and a desire to take more wine than usual; he being in his general habits very temperate.



On the morning of being affected with the head-ache, he could not bear the use of cold water; although at all other times he derived much comfort from free ab-lution with it. In these circumstances, the case is exactly similar to one which I have before related. Together with pain, he had many nervous sensations in the head, and a troublesome pulsation. I have stated these details, having the satisfaction to add, that the course of alterative aperient treatment and regulated regimen, which proved of the utmost service to him in removing the disposition to gout, was equally useful in counteracting the attacks of head-ache. The necessity for this method of treatment was manifested by the faulty state of the alvine secretions, and by the frequent depo-sition of pink sediment in the urine. Observation alone could lead to these conclusions; for the appetite was regular, and the bowels seldom failed to act daily. In this example we see a proof afforded, how much the cause of gout is generated below the stomach; how in-sidiously the disorder forms by slow degrees, when the patient, possessing appetite and seemingly healthy di-gestion, and regular action of the bowels, thinks that all the functions go on well! The truth is, that venous con-gestion is produced in the vessels of the respective viscera of the abdomen, which part of the body increases in bulk; and at length sensations of oppression are felt. Nature, in her attempt to cure this state of evil, excites the secreting vessels of the liver and other parts, the kidnies especially, to increased action; and the excreted fluids are more stimulating in their nature. Although, therefore, disorder arises in the alimentary canal, either spontaneously or excited by medicine, the *vis medicatrix naturæ* is at work; and I should apply the theory which I have offered at p. 148, in regard to the urine, in explana-



tion of the condition of bowels which takes place. It is the object of medical interference to remove this obstruction of the vessels, assisting nature's intention; and, afterwards, to bring about a more healthy œconomy by means of corrective medicine and regimen, concluding, when necessary, with the judicious use of tonics. It too often happens, however, that medicines of the latter class are given in the first instance; and no proper foundation having been laid for a superstructure, the visceral obstruction becomes only fixed and confirmed.

In the present case, the patient derived material advantage from the daily plan of sponging the feet with tepid salt water; and washing the head freely by means of a course towel dipped in cold water; using afterwards sufficient friction to dry the skin.

### CASE X.

In the following case, the prevalence of the nervous temperament, in concurrence with the gouty diathesis, produced a combination of symptoms highly distressing and remarkable.

A gentleman, aged 40, rather plethoric and inclining to corpulency, was first affected with hereditary gout at 32, in the great toe of one foot only, severely, for ten days; since which, the attacks have not been acute, nor attended with much pain. He described that three years ago he became ill with the following symptoms; and of which he was complaining when he consulted me. The gout, he said, seemed to be hanging about him. He experienced great languor; occasional palpitation of the heart; uneasiness and confusion of the head; exceeding depression of spirits; broken rest, and uneasy dreams; a sense of weariness in the arms, so that it was a painful

exertion to hold them up; a dull aching pain between the shoulders; a remarkable coldness of the lower extremities, and general cramps. On two occasions, blisters had been applied to the legs with a view to excite gout in the feet; and on one occasion, success was procured in this object; but he did not obtain the desired relief to the constitution. A year ago, after exposure to wet and cold, he was alarmingly affected with torpor in the limb, and a threatening of general paralysis. The stomach was affected with sensations of spasm, and some sickness. The symptoms increased at night; quitted for two or three days; and then returned with the utmost aggravation of all the general nervous symptoms. I found abundant evidence of an obstructed state of the liver, and an unhealthy state of the alimentary canal. The appetite itself was seldom deficient. The fæces were sometimes black in appearance; at others, clay-like. The pink sediment almost constantly appeared in the urine. I instituted a regular course of alterative treatment, by corrective and aperient medicines, in conjunction with ass's milk and regulated regimen; allowing him daily three or four glasses of Madeira. His tranquillity and rest at night were much assisted by the use of lactucarium. I directed that the limbs should be sponged every morning with tepid salt water, and freely rubbed at night with the liniment, p. 291. The head was treated with the ablution before mentioned. The happiest results succeeded to these measures steadily pursued for two months. Previously he had taken purgative medicine only occasionally; and had not been put upon the necessary course of remedy to eradicate the evil. Finally, I prescribed a draught with *sp. ammon. compos. decoct. al. comp. infus. cascarill. mist. camph.* to be taken, at first twice, and afterwards once a day; and the whole



treatment produced such good effects, that the disease, at length, yielded quite to my satisfaction.

## CASE XI.

The case I have now to describe, was one of chronic gout, very obscurely marked in its origin and progress; but which became remarkably tractable under a change of treatment.

C. R. aged 54, tall, rather corpulent in the abdomen, plethoric, of the mixed temperament, first at the age of 43 complained of some swelling of one ankle, with stiffness and weakness; which occurred, repeatedly, with the interval of a few months. Gout was unknown in his family. In 1812, when fishing, he strained one knee. On the following morning he complained of stiffness, which he expected would be carried off by exercise, and he walked accordingly, but the uneasiness increased; and on the third day active inflammation took place, with swelling and pain. This was not considered to be gout. It was treated with poppy fomentation. Much weakness was left in the part, for which camphorated spirit was applied without advantage. A stimulating lotion was next used, and also a tight bandage. This treatment produced inflammation and pain. The Buxton bath was tried for one month without benefit. A course of friction was next resorted to for seven weeks; at first for twenty minutes, and latterly for an hour twice a day. The knee was restored by this plan; but at the end of seven weeks, the other knee and both ankles became suddenly affected with pain, and with real symptoms of gout. There was not much redness, but the throbbing was considerable.



The symptoms continued three weeks. In the succeeding four years, he was troubled with several attacks of short duration. In February 1817, the knee originally affected was again attacked with swelling, stiffness, and much pain. He took a purgative medicine. On the following night the other knee became affected. Took half a bottle of Wilson's tincture. Procured sleep, and next morning both knees were so much improved, that he could walk down stairs without much trouble; and in three days after he went into the country. A relapse took place almost immediately, the ankles becoming chiefly affected. Took the same dose as before of the tincture. No apparent effect from it until twenty-nine hours, when it acted upon the bowels violently for two hours; no sickness. It gave relief. In ten days suffered another relapse, and he repeated the tincture: but without any relief. It caused sickness without affecting the bowels. After this, he took the eau medicinale and Wilson's tincture alternately, till the month of June; with no other distinguishable difference in the effect, than that he found a larger dose of the tincture necessary to produce an equivalent influence over the symptoms. The patient continued to have relapses, parrying off severity of pain by one or other of these medicines, in frequent small doses; but he was rendered very sensibly weak and languid, and altogether nervous by the treatment; and in the hot weather of June, a more decided attack coming on, he determined to discard the empirical remedies, which he felt to be injurious to his constitution, and at best only an uncertain palliation. He was then put on the use of a draught composed of sulphate of magnesia, peppermint water, tincture of hop, and some cloves. His stomach became improved, and he thought himself recovering; but in the beginning of July, he had

a slight attack in one knee. He now discontinued the use of wine and all fermented liquors, and lived in the most simple manner. At the end of the month, one knee and the whole of both feet became more affected with decided gout than at any former period, and he suffered severely. This attack left him very lame for a long time. When I first saw this gentleman, in the middle of September, he was using crutches. The bursæ at the knees and ankles were much distended and tender; and in his constitution he was much enervated. Upon investigating the case, I found very strong evidence of unhealthy secretions; the abdomen was out of proportion large; the muscles of the lower extremities were small and relaxed. I prescribed my usual aperient and alterative treatment; ass's milk and regulated regimen; and, to relieve the languor of the system, I advised two or three glasses of wine daily after dinner. Lactucarium was taken occasionally at night, with an useful effect in producing tranquillity and sleep. The affected parts were at first repeatedly sponged every day with the lotion, p. 272; and when inflammatory tenderness was quite removed, the united means of salt water sponging, the liniment, p. 291, moderate bandage, and a regular use of friction, were employed with unremitting attention. Each morning, ablution with cold water was used to the head with much comfort and advantage. The crutches were quickly laid aside; and not only have never been resumed up to the present period, February 1819, but during the whole period he has scarcely had the least return of gout, and has never been confined to the house a single day. On feeling any threatening of indisposition, he resorts to the draught, p. 198, and occasionally takes an alterative pill. Formerly he suffered at times from gravel, and often passed sharp crystallized portions.



Then he took malt liquor without particular restriction. Since the present plan of treatment, he has not once been indisposed with this complaint. No disadvantage has arisen from the daily indulgence of three or four glasses of wine; but, on the contrary, the constitution has appeared to be benefited by it, quite in an equal degree to the comfort which it has afforded him.

## CASE XII.

A gentleman, aged 59; corpulent and robust until reduced by gout; was first attacked with acquired gout at 43, having induced the disease by freedom of living. He suffered severe and frequent paroxysms, which for many years he left chiefly to their natural course; but for a few years past has taken the eau medicinale and Reynolds' specific, procuring from each medicine a palliation of symptoms; yet followed by so much frequency of relapse, that at length he gave up this treatment. From the eau medicinale more particularly, his limbs became remarkably weakened; and his head disordered by nervous sensations in an alarming degree. He next prepared colchicum in rum and water by infusion, and took small doses daily for a long time; deriving occasional ease, but having an attack of gout either in the upper or lower limbs every two or three weeks. At my first visit I found him labouring under a distressing complication of gout, rheumatism, and gravel. From the last complaint he suffered to such a degree, that the urine was often bloody. The change of organization in the limbs was remarkable. The fingers were for the most part knotty and contracted. The left knee was enlarged with bursal distension, and at that time affected with gouty



inflammation; the ligaments were in a tender state; the right knee was almost in a state of perfect ankylosis; the bursæ were distended; the ham-strings contracted, and as hard as wires. The foot of the same limb was almost ankylosed, and its form distorted; the other foot nearly in a similar condition, with the integuments œdematous, and the skin of the leg partly in a state of ichthyosis. The ligaments had evidently undergone such thickening and shortening, as to forbid much expectation of useful treatment. The internal functions were highly disordered. The appetite was deficient; flatus of the stomach and bowels was infinitely distressing; the bowels were quite torpid, and the discharges were either black or clay-coloured. I could scarcely enumerate the train of urgent symptoms which afflicted this patient; but I must add, that rheumatic pains affected the arms, the muscles of the ribs, and the loins. By day, he was wholly confined to the chair; at night, he scarcely procured sleep. When, by means of the alterative and aperient treatment, the use of the black drop in small doses twice or thrice in the twenty-four hours, the lotion and poultice externally, I had succeeded in removing the gouty inflammation; I adopted the plan of friction twice a day for an hour, salt water sponging, a liniment, and the application of rollers to the ankles, in conjunction with the continuance of the medicines just mentioned, and the addition of a tonic. Ass's milk, and a strictly regulated regimen, were added to the medicinal agents. At the expiration of three months, the tendency to gouty relapse seemed obliterated; the rheumatism was cured; and even in a short time from the commencement of the treatment, the complaint of gravel was overcome. The improvement of the limbs exceeded my utmost expectation. He acquired the power to walk with a pair of

sticks, a cork heel being added to the shoe, that he might be enabled to bring the foot of the shortest limb in contact with the ground. His health and spirits were delightfully improved; and he removed into the country for the benefit of change of air; with every prospect of gaining as complete a recovery as the circumstances of a case, previously so much neglected and ill-treated, would possibly allow.

#### CASE XIV.

In a case of a similar nature to this which I have related, the gentleman having been confined wholly to his chair for several months, in consequence of the stiffness of the knees and ankle joints (almost amounting to complete ankylosis), occasioned by rigidity of tendons, thickening and shortening of the ligaments, and distension of the bursæ, with frequent occurrence, of late, of chronic gout; I had the satisfaction, by perseverance in the plan of friction and other external treatment, in conjunction with the use of internal medicines, to effect such a change, that the patient was enabled to walk with the help of short sticks, and in fact to undertake a long tour on the continent. In this instance the use of friction was for a considerable time interrupted by the occurrence of small vesicular eruption, spreading generally on the legs, and which had been produced before I saw the patient, by the irritation of the skin, occasioned first by the bites of leeches, and afterwards by a blister; these remedies having been used with the hope of subduing the chronic inflammatory action; but the above mischief took place, and not the smallest benefit was afforded by this treatment.



## CASE XV.

A gentleman, aged 46, slight in form, and of the nervous temperament, was first affected with *acquired* gout at 36, in the ball of the great toe. Subsequently, with the exception of one paroxysm, his attacks have been of a very anomalous character. In September 1816, after exposure to wet and cold, he was seized with general symptoms of fever, painful irritation of the bladder, and a mucous discharge from the urethra, with much ardor urinæ; no cause having been applied to produce such a form of complaint. In a few days, a violent inflammation of the left knee took place, with excruciating pain; a numbness and soreness of the right hip joint; a feeling of coldness at the pit of the stomach, with sickness so as to reject every thing almost as soon as taken; and a torpid state of the bowels. Soon afterwards the shoulders, elbows, wrists, thumbs, and some of the vertebræ, were also attacked; and, very shortly, the ankle, metatarsal bones, and great toe of one foot. The pain of some of the parts, particularly of the affected knee, was so violent that he could not move in the smallest degree without assistance, and it was necessary to change his situation from one part of the bed to the other by means of a folded sheet. During twelve months, a series of remedies, too numerous to be mentioned, were employed without success. Mercurial salivation was produced on two or three occasions; but always with the effect of causing high constitutional irritation, and an aggravation of local sufferings. Anodines gave imperfect relief and disordered the head. Balsam of copaiva, the decoction of sarsaparilla, liquor potassæ, the alterative use of the blue pill, and



other medicines, were tried in succession. At one period the nitro-muriatic acid bath was used, with no other effect than that of producing troublesome pimples on the skin. The hot bath, at a high temperature, was employed with diligent perseverance. He was put on a milk and vegetable diet. To the diseased knee, acute inflammatory action having subsided, a liniment of tartarised antimony was applied, with friction, which occasioned excessive inflammation, swelling, sloughing, and a foul ichorous discharge from the ulcerated parts, accompanied with urticaria over the whole body, producing intolerable irritation and itching, and much sympathetic fever. Finally, when the parts were healed, the enlargement of the knee was reduced, and the pain mitigated; but the urticaria continued very distressing; and the general health was not at all improved by the influence of the medicines which were joined with the local treatment. I visited this gentleman first in December, and found him entirely disabled in his limbs, so that he had not the power to move about the room even with the aid of crutches. At the hips, knees, and ankles there was swelling and much tenderness. The muscles were exceedingly relaxed; the countenance wore every mark of languor and debility. From the free use which had been made of the hot bath, and an excessive quantity of flannel clothing, the skin was in a state of unhealthy perspiration. The secretions were much vitiated; the urine depositing a copious sediment, which consisted, at different times, either of the phosphates or urates, or the two deposits mixed; and the alvine discharges were either deficient in bile, or contained that secretion of vitiated quality, as was denoted by a greenish colour. The tongue was coated with a foul whitish fur. The nervous system was in a state of high irritation. He was much affected with cramps; the

pulse was quick; the appetite deficient; the spirits depressed. I adopted the following treatment. The lotion p. 272, was used lukewarm, by means of a sponge, to all the affected parts, frequently in the day; and was continued so long as inflammatory tenderness remained; after which, salt water sponging was applied night and morning; and regular friction, by a skilful rubber, was employed, at first for an hour in the morning, and afterwards morning and evening. A chamber horse was used as a mode of exercise. In the two preceding cases also, I recommended this simple expedient as an auxiliary to the general plan. It affords considerable exertion to the muscles, and particularly to those of the abdomen; and serves therefore to quicken circulation and action where most required. The internal remedies consisted in the alterative use of a mild preparation of mercury, so cautiously administered as not to cause any feverish excitement; and in the use of the draught, p. 198, for a considerable period twice, and afterwards once a day; ass's milk being taken in the morning early. The plan of diet was changed, and gradually made quite of a restorative kind. A little wine of the best quality constituted a part of this regimen. The patient improved slowly, but without interruption; and when the month of May had arrived, he could accomplish walking exercise to the extent of eight or ten miles in a day, without the least inconvenience. The puriform discharge of the urethra had been in a great measure dependant on some local inflammation; but, in spite of every treatment, it continued, more or less, until the constitutional health was restored. This case, therefore, exhibits, in the most favourable light, the advantages of the alterative and aperient treatment steadily followed up, the tonic part of the plan being made to consist in good diet. When the patient made trial of tonic medi-



dicines, under my direction, he did not derive from them the least advantage; but found either their stimulating or astringent influence to be unfavourable. Friction and the other treatment for the limbs produced the best effects. By recent intelligence from this gentleman, I learn that he has continued perfectly well.

### CASE XVI.

The following is a more unequivocal instance of a puriform discharge from the urethra being entirely connected with a gouty state of the constitution; and continuing until the general health became restored.

A gentleman, aged 45, robust, inclining to corpulency, plethoric, of the mixed temperament, was first affected with *hereditary* gout at 23, in the great toe only, but since in both feet, the knees, hands, wrists, and elbows. The paroxysm has sometimes been so severe for two months, that he has required to be fed the greater part of the time. He has taken about thirty bottles of the eau medicinale, with the usual palliative relief in the early use of the medicine; but latterly it began to fail in giving present ease; and his stomach became so weak, as to render him extremely dyspeptic; and, to use his own words, "he was often gouty in the stomach." The head became so alarmingly affected with giddiness, that at length he abandoned the medicine with dread. Has taken vinum colchici with less injurious effects, but without the least permanent benefit; relapses of gout occurring very frequently. I was consulted by this patient first in June. He was then suffering from chronic gout, and was troubled with a puriform discharge from the urethra, and ardor urinæ in a great degree. He states, that these



symptoms had continued from the month of February, with the exception of a fortnight, when acute gout affected the feet, and completely suspended them; but they returned with all their previous virulence at the cessation of the paroxysm. The alterative and aperient plan of treatment, with the use of ass's milk, and regulated regimen, proved completely successful. At bed time he took pills of lactucarium and pulv. ipec. comp. with much advantage. At the end of two months, every feeling of gout was removed. After a few days use of the medicines, the symptoms affecting the urethra very much abated, and had ceased at the end of a week; but then they recurred again for a short time; finally, however, yielding completely to the constitutional means of treatment.

### CASE XVII.

The following case may be offered as the most common example of the lameness and chronic state of gout, which are left by the acute paroxysm, when injudiciously treated or wholly neglected: It very favourably exhibits the advantages of friction, and of constitutional treatment.

A. B. aged 40, of middle height and bulk; robust, of bilious diathesis, and of the sanguineo-nervous temperament; was first affected with *acquired* gout at the age of 27; and, since that period, has not had a longer interval from gout than nine months; the fit sometimes returning four or five times in the year. He has been attacked severely in the feet, knees, hands, wrists, and occasionally in the shoulders. In his last paroxysm, he suffered intense pain in the groins. This gentleman pos-

sesses a strong constitution. Till within the last two years he took the eau medicinale freely; and by it usually succeeded in removing the immediate symptoms: but the fit returned with four-fold frequency, and without any abatement in severity; the stomach became weakened; the loins remarkably affected with aching pain, stiffness and debility; and the ankles were swollen upon every slight exertion. At a subsequent period he made free use of Wilson's tincture, and found it a less active medicine, both as to benefit and injury, than the eau medicinale. It proved only a temporary palliative, his disorder increasing in the constitution in the same proportion that he attempted this mode of cure. I found that he had scarcely been free from gout during a year past; and was then so lame as to require the use of crutches. On first leaving his bed in the morning, he was almost unable to bear in the least degree on the feet, such was the weakness and tenderness of the ankles and knees. With some patients I have met with this state of infirmity in an extraordinary degree, although, when the day has advanced, they have walked tolerably. To proceed with my account, he complained of all the symptoms just now stated; was distressed with cramps, and at night with starting of the limbs; had flying pains in the shoulders, and aching at the right shoulder blade: the appetite was very good; but from any incaution in the quantity or quality of his meal, he suffered oppression at the stomach, and heart-burn. The complexion was yellow. The urine deposited much pink sediment, and the alvine secretions were quite disordered, the fæces variously appearing mucous, very dark, or clay coloured. I shall conclude with briefly stating, that friction was used for an hour daily, its use being begun as soon as the tenderness of the parts was sufficiently removed; and such was the



happy result of the combined plan of external and internal treatment, which was attentively pursued, that at the expiration of three weeks, this gentleman was enabled to walk without lameness; and, in six weeks, his general health was quite restored.

In the two following examples, the immediate connexion between an unhealthy state of the digestive organs, and the occurrence of gout, as cause and effect, is strikingly shewn.

### CASE XVIII.

C. D. aged 52; tall and of middling bulk, of the nervous temperament, was first attacked with gout a few months ago. Neither of his parents had this disorder, but on the maternal side he referred it to uncle and aunt, grandfather and grandmother. His ankle and the internal edge of the foot were the parts affected. The skin was red and shining. Intense pain came on about two in the morning and continued till five. With the first invasion of the symptoms, he was seized with cold perspirations, and fainting; to which he has for many years been occasionally subject. The acute symptoms were tedious. He had taken only some ordinary purgative occasionally. Much weakness was left in the foot; and it was œdematous after slight exertion. The constitution was more seriously affected. This patient was a clergyman, and described, that, since the gout, his nerves had been so weak that the exertion of preaching had the effect of rendering him extremely faint and exhausted. He often complained of a sense of tightness in the head, noises in the ears, and a frequent vision of black spots, or of flies.



He also felt, when in cold air, as if the wind were penetrating into the head. The appetite was far beyond the powers of digestion; as he constantly suffered from heart-burn and flatus. Frequent support to the stomach was necessary, without which he experienced a sense of sinking at the pit of the stomach, and general languor. The secretions were quite unhealthy. The tongue was mostly white, and occasionally furred; the saliva viscid, and often of a saltish taste. The urine deposited a mixed sediment; the bowels were torpid; and the fæces were often knotty, and either very dark, or of the clay-like appearance. Latterly he had taken some stimulant biters, upon the theory that debility alone prevented the healthy functions of the alimentary canal. This treatment aggravated all the symptoms; and with it he experienced occasional sensations of gout in the great toe. It was evident that purgatives and alteratives, with regulated regimen, would constitute the only safe and useful plan of cure in this case; and which was immediately adopted. Each other night he took pills containing hydr. submur. gr. ss. pilul. hydr. extr. colocynth comp. extr. hyoscyami. āā gr. iv. and the draught, p. 198, once or twice daily for a fortnight; and afterwards only in the morning early; and in the middle of the day, one composed of equal parts of decoct. al. compos. infus. cascarrill. mist. camph. with sp. ammon. compos. 3ss. the alterative pill being reduced simply to pilul. hydr. gr. iv. For the fourth week, the last mentioned draught was taken twice a day, and the former omitted entirely. He derived much comfort from the occasional use of lactucarium at night; and of a cordial mixture in the day, when feelings of languor returned; which, however, he seldom experienced. It was matter of no small surprise to him, that the early part of this treatment which he ap-

prehended would prove of a lowering nature, seemed to improve his strength and lighten his spirits, when the previous plan of tonics had really oppressed him and increased his feelings of debility. Ass's milk, regulated regimen, the morning ablution of the head, and sponging of the feet, were means which entered into the general treatment of the case; and the termination of it was most successful.

### CASE XIX.

G. B. aged 48; tall and slight; of bilious diathesis, and sanguineo-nervous temperament; was first affected with acquired gout at 38. He found himself becoming more corpulent when first visited by gout; and he thinks that some fulness of habit has been an admonishing circumstance in most of his subsequent attacks. He has invariably found himself highly bilious when affected by gout. His habits are remarkably active, and for a long time past he has been very temperate in diet. One of his attacks appeared to be consequent to the disuse of regular horse exercise. This gentleman was labouring under chronic gout, chiefly affecting one foot, when I was first consulted. The integuments were œdematous; the great toe was much enlarged, very tender, and occasionally painful. I adopted my usual plan of treatment, and with the usual success; but found more than ordinary occasion to follow up the use of moderate doses of alterative aperient pills, in conjunction with the draught p. 198. The discharges were usually of a greenish colour, often exhibiting an oily appearance on the surface, and peculiarly fœtid; sometimes they were knotty. When describing, in a written report, this state of the bowels, he



says, very emphatically, “ My toe is to bile, what a barometer is to the weather. In the same proportion that the bowels were freed from their improper contents, and from the green bile especially, the tension and pain about my toe sensibly and indeed rapidly diminished. I feel convinced, that had I abstained from calomel another day, I should have had a return of gout ; perhaps of a severe nature.”

When all the symptoms of gout were removed, he resumed his regular horse exercise with very great advantage ; and I must here observe that this important remedy should always be recommended in the general directions of the physician, when the convenience of the patient permits. Horse exercise, and the air of the country, are powerful aids towards a perfect recovery, when the stage of convalescence is advanced.

I have introduced these last two cases, for the purpose of shewing the immediate connexion of gouty action in the limbs with the vitiated state of the internal secretions ; and this at a time when the appetite is good and regular, and the tongue is bearing a healthy appearance ; so entirely is the fault of the digestive process, under the present circumstances, below the stomach. Nay, it sometimes happens that the urine will not, for the most part, appear unhealthy either in quality or quantity ; and the whole error consists in the obstructed state of the liver, in the vitiated secretion of that important organ, and in the secretions of the intestines themselves. We are ignorant of the proper functions of the spleen and of the pancreas ; but it may be entertained as a probable opinion, that the healthy œconomy of these parts is also interrupted. In those instances of remarkable corpulence about the abdomen, with indications of fulness of



the habit, which have been gradually taking place, before the gout has declared itself in a fit, I consider that the vessels, and the veins especially, of the whole contents of the abdominal cavity, have been in a state of *engorgement*; to use an expressive phrase. In most persons, and particularly in those of plethoric habit, we see a very distended state of the veins in the extremities, either just at the time, or rather before the invasion of the fit. How well then does the treatment by alteratives, and aperients, and regimen, unite with this pathological doctrine! The practitioner must not too hastily satisfy his judgment that he has rectified the secretions, or done all that is required toward the lasting improvement of the constitution. One day may afford the appearances of healthy secretion, while, on the following day, the very contrary evidence takes place. Also it must be his care that he reduces the size of the abdomen within proper limits; and he must instruct the patient to keep watch against its insidious increase. At the same time every care is to be employed to improve the bulk and firmness, and muscularity of the limbs, by suitable local treatment and exercise. Contrast the recovery of the gouty invalid, conducted upon these principles, with the results of the empirical modes of treatment. Witness, from the latter, the state of the patient, with the stomach weakened, and the general secreting functions rendered torpid; the abdomen large; the muscles and the limbs small and weak, with the integuments œdematous; and, lastly, the nervous system, sooner or later, shattered to the foundation. A few constitutions of extraordinary vigour may afford exceptions to this strong picture; but I sincerely affirm, from my general observation, that the colouring is faithful, and not too deep in a single tint. I have still a few words to add.

In the cases which I have here offered, I may appear to have drawn too favourable a sketch of the treatment of chronic gout. I have not exaggerated a single fact ; but at the same time, I do not wish to keep out of sight that in some cases the cure is with difficulty effected. Yet I must contend, that however tedious the recovery may in some instances prove, the principles of the practice do not on that account become invalidated. Patience must be exercised ; for the alterative method is of necessity slow ; yet, though slow in its progress, its effects are sure.

A protracted state of chronic gout is almost invariably maintained by an unhealthy condition of the functions of the liver ; and when this is the fact, the patient should be rather taught that he is undergoing a probationary course for the cure of this organ, than for the cure of gout alone. With such a truth impressed upon his mind, he will the more readily accommodate his expectations to the periods of weeks or months, which may elapse in obtaining his cure. I am clearly convinced, that no treatment but that which is truly constitutional can procure solid and lasting benefit. If, also, in the progress of the cure, a relapse of gout do take place, it does not contradict the propriety and value of the plan of treatment ; but rather proves the deep seat of complaint which has been fixed in the constitution ; and our conclusions should animate us to persevere in our means of gradually eradicating the evil. I have before remarked, that the most difficult cases of gout are those in which some quackery has been previously employed ; and from which, a disposition to frequent relapse has been acquired ; but I have also observed, that due perseverance in regular principles of proceeding, will conquer even this difficulty. I have dwelt, tediously I fear, on these points ; but I have done so, because experience has taught me their importance.



At p. 385, I have adverted to the blended symptoms of gout and rheumatism which occasionally take place. Cases of this description are usually met with in those who have injudiciously nursed themselves with flannel, a great quantity of clothing in bed, and a very hot apartment, during the period of a paroxysm ; neglecting also, in all other respects, the proper methods of treatment. The liability to relapse, upon every exposure to a humid atmosphere, or a cold wind, proves a distressing circumstance. The physician, when consulted in such a case, must give the patient an impressive warning on the subject of exposure; for otherwise his best means of practice will fail, and incur undeserved reproach. The following instance will exemplify my present statement.

## CASE XX.

J. R. aged 60, of slight form ; of the nervous temperament ; was first attacked with *hereditary* gout at 30. For three months in the autumn of 1817, he suffered a series of relapses of gouty pain and slight inflammation, affecting the feet and knees. Each attack confined him to the bed or the sofa. He used such an excess of flannel covering to the parts, that he produced constant perspiration, locally and generally ; and infinitely increased the debility which the disorder itself occasions. For several nights he took a drachm of vinum colchici with some magnesia. For the first two nights he experienced a little relief ; but afterwards he states, it had not any useful effect. In the short intervals of imperfect recovery, he yielded to the calls of his affairs, and either changed his apartment or went abroad ; and on one occasion, being accidentally exposed to wet, he brought on



gout in one knee severely; and also was tormented with flying rheumatic pains in the arms, and pain in the sciatic nerve of each limb together or alternately. The gout on this occasion took possession of its former situations in the feet, and in the other knee; with but little appearance of inflammation, and it chiefly affected the bursæ and the tendons. I visited this gentleman under this complicated state of suffering; and knew from experience that his recovery would necessarily be very tedious. He complained of clammy perspirations, attended with coldness. He was languid and debilitated. His appetite was not deficient; but the bowels were inert, and the action of the liver was torpid, as was indicated by the whitish appearance of the fæces, which were passed chiefly in pellets. The urine deposited pink sediment; although that which was secreted in the night was most commonly transparent. I viewed this circumstance as the index of a quick digestion in a nervous constitution, the digestive organs being at the same time unhealthy. I shall avoid the tedious details of treatment, and briefly mention, that each other night an alterative dose of hydr. submur. was given in conjunction with extract. colocynth. comp. and extract. hyoscyam.; the former being changed in about a fortnight for pilul. hydrarg. The most satisfactory relief of the rheumatic pains was derived from the use of gutt. nigr. administered at three intervals during the day, and partly in admixture with the draught, p. 198. The limbs were treated on the principles which I have so often described. When inflammation, requiring the use of the lotion, was removed, the joints were surrounded with empl. saponis, spread on leather; which appeared to afford the double advantage of causing a favourable moisture on the surface, and of protection from the influence of variable temperature. In the next stage of the

treatment, salt water sponging, friction with a liniment containing tinctura lyttæ, and flannel bandage, were the means employed; and, finally, friction by a skilful rubber completed the cure. The restoration of the constitution was assisted by change of air to the sea-side; and by blending the use of tonic medicine with judicious regimen. I must add, however, that a period of three or four months elapsed before the recovery was perfectly accomplished.

The two following cases I shall relate very concisely, for the sake of *diagnosis* alone.

### CASE XXI.

A gentleman, aged 45, of middle height and bulk, well formed, his chest circular, of the nervous temperament, when at the age of 24, suffered much from chronic rheumatism; and at 43 was first attacked with gout in the great toe, inheriting the disposition from his father. He has since had repeated fits, affecting both feet. His habits of living had constantly been very intemperate even in the use of spirits; and his exercise in hunting violent. About two years and a half ago, he was repeatedly exposed to wet and cold, accustoming himself to travel on the outside of a stage in wet weather, insufficiently protected by clothing. In the origin of the unfortunate disease which forms the subject of my present communication, and which commenced after this exposure, he complained of pain between the scapulæ passing through to the chest, as if of rheumatism. No relief was afforded by medicine, and the symptoms gradually increased. The pain was sometimes so acute, as to convey to his mind the idea "of hot needles being



suddenly pierced into his flesh." At other times he felt a severe deep-seated gnawing pain, attended with the sensation of having been bruised; and not unfrequently as if a heavy weight were laid upon the chest. Very aching sensations affected the arms. On pressure in the epigastric region, he not only complained of much tenderness at that part, but also suffered increased uneasiness between the scapulæ. He declared that he had never felt the least respite from his sufferings either day or night, but on two occasions, when labouring under severe symptoms of acute gout. It is particularly worthy of observation, that so long as the urgency of the paroxysm continued, it served to suspend the pain which affected the chest; but which returned again as the symptoms of gout abated. Medical treatment was wholly unavailing, except that sedatives and rest now and then seemed to have a slight palliative effect. Some months after this period, a prominence on the left side of the sternum was discovered, attended with a strong pulsation. A pulsating tumour by degrees became very evident; and the melancholy case shewed itself to be unequivocally an aneurism of the aorta.

## CASE XXII.

A. B. aged 41, robust and plethoric, but of the nervous temperament, suspected himself to have been affected with gout, by right of inheritance from his father, under the following circumstances.

A year ago, when having gonorrhœa in its advanced stage, he was suddenly attacked with a swelling of the little finger, and, in a few days after, in the following parts, in quick succession:—the right knee, the right



instep, left knee, and the left instep. The parts were swollen, free from discolouration, and not painful; but he was rendered completely disabled from walking for three weeks. The discharge from the urethra ceased immediately upon the above attack becoming general, and never afterwards returned. He mentions that he was singularly languid and weak, and imputed the attack itself to the active effects which the use of the Cheltenham water had produced upon his bowels.

On a second occasion, gonorrhœa having first existed, he suffered a similar attack to the preceding, on the morning after having used a hot bath. He became suddenly so much disabled, that he could not move either hand or foot. On this occasion, the discharge from the urethra was not suspended by the affection of the limbs.

A third time, after having laboured under gonorrhœal infection about a fortnight, and being under the active influence of aperient medicine, he was suddenly seized with a swelling of the knee, which did not cause pain, nor tenderness even to pressure; but the stiffness was extreme, and he could scarcely bear upon the limb. The discharge from the urethra continued. I saw this gentleman under these circumstances; and from the characters of disease which I found, and from his accurate description of his former attacks, I was convinced that he had never been affected by gout; which was the name always before given to the disorder. The swelling in this instance, and which he said resembled the former appearances, was entirely bursal. The distension was very great. It seems, therefore, that in certain constitutions, a diseased condition of the bursal membrane, in one or more parts of the body, ensues as a sequel to gonorrhœa; giving rise very suddenly to an increased secre-

tion of the synovial-like fluid of the bursa, and to much consequent distension, and lameness. In regard to the treatment in this case, I shall briefly mention that a mixture, consisting of balsam. copaiv. mist. amygd. and vin. colch. appeared useful, and certainly influenced the state of the urethra very favourably. A blister was applied to the knee with advantage; and when the skin was healed, friction with a stimulating liniment, and the use of a bandage, seemed to assist in completing the cure. As on the former occasions, a remarkable degree of languor and debility were experienced for some time; but he derived sensible benefit from a mixture of decoction of cinchona with an aromatic tincture, and the carbonate of soda; lemon juice being added at the time, so as to produce effervescence.

## CASE XXII.

At page 94, I have adverted to the very material practical distinction, which is to be held between the circumstances of a discharge of blood taking place from the hæmorrhoidal veins, and from the branch of an artery of the rectum. The following case is as striking an illustration of the point in question as can be desired.

G. B. aged 45, tall and robust, and of the mixed temperament; inherits gout from his father. In the first instance, about four years ago, he felt irregular pains in the wrist and fingers, and ankle, as if he had sprained these parts. At the same period he noticed frequently a discharge of blood from the hæmorrhoidal vessels. Becoming debilitated, he was recommended to the use of cold sea bathing. After remaining at the sea side for a month, he returned home, not having derived



any benefit. He then used the cold shower bath, once; and about two o'clock on the following morning, he awoke suddenly with a pain in the ball of the great toe, attended with sensations of burning and throbbing. The pain abated about ten, when gentle perspiration and sleep ensued. The fit was not of long duration, and not being remarkable in the symptoms, I omit to describe its progress. He was supposed to have a diseased state of liver, and was put under a course of mercurial medicine. In about five weeks after the attack of gout, his hands and feet became extremely painful, and were swollen, without discolouration of the skin. He was feverish and debilitated, and very soon, inflammation, having the appearance of whitlows, formed under the nails in both hands and both feet. Suppuration followed, and he lost the nail of the right thumb, and almost all the nails of the toes. He soon went to Buxton, where he pursued a course of the waters, bathing and drinking, and appeared to recover his health. Shortly after his return home, he was seized instantaneously, when at dinner, with violent spasms and acute pain in the stomach; but obtained relief in about eight hours from using medicine, brandy, and also æther. These symptoms were succeeded by raging pains in the feet, knees, hands, and wrists. He was confined to his bed for more than two months, and for three years he was seldom free, for many hours together, from similar pains affecting various parts, and changing situation with astonishing rapidity. He visited Buxton again without advantage. The bleeding from the hæmorrhoidal vessels returned with great violence. His complexion was sallow, he was reduced in flesh, his head became affected with excruciating pain, and frequent giddiness; and shortly after, the limbs becoming again attacked severely, he was confined to the bed, where he lay for twelve



weeks, unable to move hand or foot. A series of attacks, differing in violence, but all severe, afflicted this gentleman at short intervals for two years longer, when he first came under my care.

Upon an investigation of the case, I found that the hæmorrhage which had formed so material a circumstance in the case, had been wholly arterial, and this fact disclosed the source of the broken-down state of his constitution, which, to use his own words, "must originally have been of adamant, or he would long since have fallen a victim." The copious history which he gave me of his sufferings, in addition to the detail which I have already stated, would occupy too much space to be narrated; but I will offer a very summary description. Together with œdematous and bursal swellings, and weak inflammation in various parts of the limbs, he complained of numbness both in the upper and lower extremities, and in a day or two after each severe attack, he usually experienced the sensation of having been severely bruised. He was constantly disabled from walking. When under a paroxysm, the weight of the bed clothes could not be borne. The nights were always restless, interrupted by night-mare, and frequently passed without any sleep. The appetite was lost, and the stomach became painfully distended by a small quantity of food. The bowels were torpid, and the secretions, both alvine and urinary, were most unnatural. The head was affected almost constantly with shooting pains, and sometimes to a degree almost insupportable; also with stupor and giddiness. He mentioned that on one or two occasions, the skin of his body turned blue for some minutes. Palpitation of the heart was a most troublesome symptom. So general a tremor affected the limbs, that he could not guide a pen.

It was evident that this patient was every day falling a victim to the loss of arterial blood from the bowel. The necessary operation was most judiciously performed by Mr. Copeland, who secured the bleeding vessel by ligature, avoiding skin, and including only the hæmorrhoidal tumour and mucous membrane. No untoward symptoms occurred.

About eight months have since elapsed, and I have the satisfaction of stating, that this gentleman has by degrees recovered his health.

He has been slightly affected with gout once; but the symptoms were quite tractable, and the constitution is now become regenerated.

I have met with many other cases of the same description, in gouty persons, and in others not subject to gout, in which the same operation was performed by Mr. Copeland with invariable success, and without any untoward occurrence. It deserves also to be mentioned, that the operation is not attended with pain.

In every case which has come under my observation, the patient has been misled by the delusion, that the loss of blood was of a salutary nature. Dyspeptic symptoms inadequately relieved by medical treatment; nervous languor and depression of spirits, which is sometimes extreme; loss of flesh in most instances; and muscular debility; have constituted the leading features of complaint produced by this most injurious drain from the constitution. The tongue has appeared remarkably pale. The pulse becomes quick from slight causes.

One gouty gentleman relates, that a paroxysm occurred with certainty after every considerable hæmorrhage; proving that a state of debility and irritability rather tends to favour than to prevent the occurrence of gouty symptoms.



I shall state in the most compendious manner, a few miscellaneous cases of chronic gout, connected with material disturbance of the constitution.

### CASE XXIII.

H. H. aged 51; tall and slight; of the mixed temperament; was first affected with *acquired* gout six months ago. The ankle was the part affected. It was preceded for a few days by an attack of quotidian intermittent, the patient never having had an ague before. He had been overheated in hunting, and took cold from exposure to the evening air. The two disorders continued together. The pain of the gout was severe, and the sense of heat compared to that which might be produced by boiling lead. The intermittent began about two *a. m.* with a rigor which lasted several hours, followed by a hot fit which continued for two hours, and terminating with the most profuse perspirations. At this period a great torpor of the bowels and much dyspepsia prevailed. Aperient and alterative medicines were useful; but a short interval only was procured either from gout or ague; the one or other complaint being almost always present, and sometimes, as in the first instance, both sufferings existed together. He visited Harrowgate, and used the water internally and as a bath with some advantage, but without success; and for the space of five or six months, he did not enjoy any feeling of health.

At this period I first saw the patient; he was reduced in flesh; the pulse was 90 or 100 in the minute; the gout and ague were affecting him in a very irregular manner; the vessels of the liver were obstructed; he was dyspeptic; and all the secretions were morbid. The gout had latterly affected the ball of the great toe; and,



partly as the consequence of an imprudent use of cold water by means of pumping on the foot for some minutes daily, a stiffness at the ball of the toe had been produced, almost to the degree of ankylosis. Upon an investigation of the case I found that there was a tender node on the tibia; and also that the eyes were affected with membranous ophthalmia. I detected, therefore, as the most important point, that a syphilitic virus was existing in such force as to keep the system in a state of irritation, which had prevented any treatment from being permanently successful for the gout and the ague.

I shall briefly add, that after a due employment of mercurial evacuants, with the draught p. 198, bark was administered with great advantage, and at the same time alterative doses of the oxymuriate of mercury. Finally, a course of warm sea bathing; the continued use of the oxymuriate, and a free employment of sarsaparilla, with generous diet, completely restored this gentleman's health and constitution. Daily friction, and shampooing, with liniments, were necessary for a considerable time, in order to the restoration of the long lost use of the foot.

#### CASE XXIV.

A gentleman, aged 31, of robust appearance, and of the mixed temperament, had been affected in a very singular manner, for about two years, with bursal swellings at the knees and ankles, and much pain and lameness. By some of his medical advisers the complaint was called rheumatism, by others chronic gout. His father had gout slightly three or four times in his life. This patient had great peculiarity of constitution. His habit was altogether extremely irritable. He was sub-

ject to severe pain in the back of the head, attended with violent throbbing. He suffered much from nervous depression, and was incapable of much exertion. He had been put on low diet, and a course of Cheltenham water in conjunction with mercurial alteratives. At the termination of this plan of treatment, my opinion was consulted.

I found the constitution much debilitated, and that chronic gout was affecting the knees and the feet generally. The pulse was quick; the nervous system in a state of high irritation; the head affected as before described; on the slightest exertion profuse general perspirations took place, and the skin was almost universally covered with miliary rash. The biliary secretion was much vitiated, and the deposition of pink sediment in the urine was most copious.

Here appeared some opposite indications. Stimulus to the circulation, if not used with care, exerted an unfavourable influence; but from the plan of low diet he had suffered injury. I found it necessary to direct a very supporting regimen in conjunction with the active use of alteratives and aperients; and at the earliest opportunity I prescribed sarsaparilla and nitric acid;\* which agreed perfectly. A free use was made of the extract from the acetum colchici with every advantage. The limbs were treated with friction and shampooing, and a liniment twice a day. Night and morning the head was freely washed with cold water; and at other times, when hot and painful, the lotion, p. 272, was freely used. Even-

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\* I may take this opportunity of mentioning, that I do not remember in any instance to have seen disagreement produced by the use of the mineral acids with gouty patients;—a result which is, perhaps, contrary to the general impression.



tually, the removal to the country, horse exercise or travelling in an open carriage, the use of the Buxton bath, and a strict attention to the digestive functions in every particular, restored this gentleman to such an improved state of health, that instead of debility of constitution and infirmity of limbs, with various other inconveniences, he became strong and cheerful, and so free from gout, that he was able to join in the merry dance.

### CASE XXV.

A young lady, aged 23, of nervous constitution, was affected with gout at the ball of the great toe, at the early age of 13, and has since suffered many attacks in the feet, and occasionally in the hands. She inherits gout from her father. When I first saw this patient, her situation was lamentable. The pulse was never below a hundred; the tongue was much furred; she was without appetite, and was reduced in flesh; and her nervous system was extremely sensitive; but the state of the limbs was the most remarkable. Both feet were turned inwards, so that she appeared club-footed. They were swollen to such a degree, that the skin was almost bursting. The temperature of the parts varied so much, that in the same day she would describe them as changing from a state of icy coldness, to burning heat as if they were in the fire. The integuments were not simply œdematous. Effusion into the cellular membrane, caused by frequent chronic inflammation, had become so dense or consolidated, that the finger could not produce any pitting. The pain was very severe whenever the inflammatory action prevailed; and such was the tenderness of the



joints, that she could not possibly bear in the least degree upon her feet for a moment. The bursæ at the knees were distended and tender, and the wrist joints were in a similar state.

The constitution became materially improved by a comprehensive plan of treatment with alteratives, aperients, and sedatives; and the use of tonics was added as soon as inflammatory action was fairly removed. The distorted limbs were most advantageously treated with friction and shampooing, applied two hours daily; a stimulating liniment being also used. To one limb an ingenious instrument, constructed by Mr. Callam, was applied, so as to force the muscles to perform their right antagonist action. Although the case is now, after several months, only in progress, and much more remains to be accomplished, the situation of this young lady is so far improved, that she can succeed in walking by means of a stick; and her health has undergone great improvement.

How instructive a lesson is here afforded, to use every attention by local treatment, to prevent the injurious stay of inflammatory action, which, left to its own course, produce so much disorganisation of parts; and, above all, it is important so to watch the muscular action of the limbs, as to guard against contraction and distortion; and that consequent lameness, which, if long established, may bid defiance to all the means of art.

In the present case, the continuance of friction and shampooing; first a course of warm sea bathing, and afterwards of the Buxton bath; will constitute a material part of the plan to be pursued.

## OBSERVATIONS.

It has occurred to me to witness many instances of local or constitutional disease in gouty persons assuming the most alarming and dangerous symptoms, and yet terminating in recovery. The examples have been so remarkable, that I have been led to the conclusion, that in gouty constitutions, an accidental disorder may wear every threatening appearance with less of the existence of actual danger, than would belong to the same amount of symptoms in another individual not subject to gout. I am inclined, therefore, to argue that the gouty constitution possesses in a peculiar degree a morbid sensibility of nerve ; so that a disturbance of the nervous system is readily produced, and leads to so much urgency of feeling in mind and body, that the patient either actually does suffer a remarkable aggravation of the usual symptoms, or constantly makes such a representation to his physician. I will briefly describe two cases in illustration.

## CASE XXVI.

A gentleman, 56 years of age ; of slight form, and of the nervous temperament ; had been subject to occasional attacks of *hereditary* gout for several years. By degrees he became affected with a difficulty in emptying the bladder, attended with some aching pain. The first symptom which gave him real alarm, was the appearance of blood in the urine ; and as this occurred from time to time, the bladder was sounded upon the suspicion that a calculus

might produce the symptoms. The examination was repeated by different surgeons, but no calculus could be discovered.

On two occasions, a copious hæmorrhage immediately followed the use of the catheter, and also urgent tenesmus of the bladder, and severe pain. The copiousness of deposit of puriform mucus in the urine was quite remarkable; and when this circumstance was connected with the occasional discharge of blood, the idea of an ulcer of the bladder was very naturally entertained. The prostrate gland was found enlarged and tender, and hence a considerable explanation of the case was afforded. The symptoms became more and more aggravated, till at length the most painful irritation took place day and night; the interval from painful desire to empty the bladder, being rarely more than half an hour. Every aid that could be devised by surgical and medical art was employed. A course of warm sea-bathing was pursued without material benefit; during which, gout attacked the feet, but did not relieve the state of the bladder. The patient became emaciated, and appeared to be fast advancing to a state of imminent danger.

With regard to treatment, it is but just to observe, that, although its want of efficacy was much to be regretted, the urgent symptoms were palliated, so as to save the constitution in a great measure: and at length a favourable change began, and continued without much interruption. An issue by the side of the perinæum afforded very decided benefit. The tone of the bladder is so much lost that the constant use of a flexible catheter is required; but when the aspect of the case was so truly formidable, it is satisfactory to observe, that this gentleman has recovered his general health, and does not now suffer much painful inconvenience.



## CASE XXVII.

A gentleman, aged 49; corpulent, and of the nervous temperament; first had an attack of gout in the ball of the great toe, at the age of 39; and since, both the upper and lower limbs have been affected. In the last two years he has had two fits in a year. Previously to a fit, he has usually felt dyspeptic and much depressed in spirits; and upon recovering from the gout, has considered his health improved. The illness which I am about to describe, began ten months ago. The first symptoms were, irregularity of appetite, much flatulence, a torpid state of bowels, inability to ride on horseback so fast as usual, a sense of oppression at the stomach causing shortness of breath, and much nervous feeling. There was considerable yellowness of complexion; the alvine excretions were either deficient in bile, or contained such only as was extremely vitiated, it often being of an olive green appearance. The urine deposited lateritious sediment. In a short time the symptoms became more urgent. The patient was frequently seized with feelings of suffocation; and when the attack occurred in the night, his nervous alarm was excessive, and on many occasions he could not remain in bed. The pulse was constantly more or less irregular, and a palpitation of the heart was a frequent and a distressing symptom.

In opposition to the attentive employment of mercurial purgatives and diuretics, the use of the warm bath, and other appropriate treatment, the disorder increased, and at length the thighs and legs became completely anasarcaous. It is worthy of remark, that now the threatening of suffocation was less frequent and less considerable, and as a diagnostic indication of importance, the patient could lie perfectly flat in bed without much in-

crease of embarrassment in the respiration. Still the pulse continued extremely irregular.

The same principles of treatment were pursued. Leeches applied *ad anum* gave remarkable relief; the respiration becoming much more calm; and various uneasy sensations being considerably alleviated. *Digitalis* was useful. Calomel, gamboge, and the compound squill pill in such doses as did not distress the stomach, with a morning dose of *oleum ricini*, acted favourably.

It was evident that a plan of treatment directed to the cure of the disordered liver, was the only one which could be useful; for unless the irregular action of the heart was secondary and sympathetic, the event, under all the circumstances, could not be expected to prove otherwise than unfavourable.

Nature lent her aid at this period in producing acute gout in the lower extremities, which was left to its own course, upon the principal which I have stated at p. 187, of giving most consideration to any disease, present or threatened, of more importance than the gout. A decided amendment took place, and proceeded so regularly that he soon removed to the sea, and entered on a course of warm sea bathing. He continued to improve in convalescence, until some circumstances occurred unfavourable to the tranquillity of his mind. The functions of the liver and of the bowels again became obstructed; and the return of all the former symptoms was strongly threatened. The active plan of treatment was resumed; and I have the pleasure to add that this gentleman is reported now to be in a state of amendment, which promises a great probability of recovery.

I shall conclude the general subject of Chronic Gout, by a brief discussion of the treatment of the gouty concretions.

## OF THE GOUTY CONCRETIONS.

THESE concretions, of which I have already made mention at p. 49, 123, 124, 155, and in cases i, ii, vi, xiii, xiv, xv, were described by the ancients as constituting the tophaceous\* kind of gout. Sydenham, after all the preceding humoral pathologists, believed them to consist of indigested gouty matter thrown upon the joints, and changed into their peculiar state of hardness by the heat and pain of the joint. Van Swieten, on the same subject, speaks of this chalky matter as being formerly in a condition to circulate through the vessels, and views it as a deposit from the circulation. Believing the concretion to be of a real chalky nature, he mentions that it proves soluble in acids, and advises the muriatic in conjunction with the oil of turpentine as a solvent. It is truly curious, that, from asserted experiment, he should recommend, as a remedy, that acid in which the uric compound would be the least soluble. He afterwards however remarks, that alkaline applications had been more generally employed; and he says also by himself, with much success. Such were the unsettled conclusions into which this eminent man was led by the ignorance of chemistry, which was universal at that day.

It is a remarkable circumstance that the disposition to this peculiar secretion in the capillary vessels of the

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\* A general term to express concretion, derived from the Hebrew.



extremities, takes place in some constitutions not until after many years of gout. I know one gentleman who has been subject to gout for forty-five years, and has suffered from the uric concretions only during the last twelve years. I never saw a more aggravated case. At the elbows, in the hands, the legs, and the feet, there is scarcely any portion of surface free from the uric deposit. It is even visible under the tunica conjunctiva of each eye. As a proof that in cases of this description there is a constitutional disposition to an excessive formation of uric acid, I may state of this gentleman that he has suffered in a severe degree occasionally from uric acid calculi, although for the most part his urine is deficient in uric acid. I have met with many examples in which, notwithstanding that the parent has transmitted the disposition to gout, yet the son has escaped the chalk stones with which his father had been much afflicted; and, also, I have often witnessed the exact reverse of this fact.

In the first deposit of the uric compound which constitutes these concretions, it may be much, if not altogether, in the power of remedy to obviate the inconveniences which neglect would certainly produce.

From the easy solubility of the uric acid in pure potash liquor, I was led to the employment of this medicine as an external application; and in three instances of recent deposit, it was so successful, that the concretion which had been visible under the skin, became gradually removed. I have directed it in dilution with an equal quantity of recently prepared almond milk, to be applied, by means of friction, two or three times in the day. Should this degree of strength irritate the skin, it may be more diluted; but I have usually found that it is borne in these proportions without inconvenience.

When the concretions have been of long standing, and are much indurated, their absorption is with difficulty excited, and perhaps cannot be accomplished.

Even this case however must not be abandoned. A patient who came under my care, had long suffered pain and occasional inflammation from enlarged bursæ mucosæ in each hand. Their extreme distension and hardness gave the appearance of large bony tumours. On examination, it was evident that the bursæ were filled with uric matter. The use of the alkaline liniment, in a short time, was so far efficacious in lessening the size of the tumours, that the tightened skin became relaxed, and the use of the fingers was much improved.

In three cases, in which the concretion had partially forced itself from the cellular membrane and cutis through the cuticle, the application succeeded in causing the removal of the remaining deposit.

As foreign bodies, these concretions occasionally produce ulcerative irritation, and consequent sores; requiring surgical treatment\*. Mr. Hunter remarks of them, "they leave the parts not easily excited to inflammation; the chalk shall remain for years without producing inflammation, and seldom produce it at all, but from quantity†."

A gentleman, aged 63. who has suffered from acquired gout for the last thirty-three years, has several

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\* See a Paper on this subject, by Mr. Moore.—Medical and Chirurgical Transactions, vol. i. p. 112.

† Mr. Brodie informs me, that he has succeeded in conquering this morbid action of the vessels, by the occasional application of the argenti nitratum to the diseased open surface.

ganglions in the fingers; and in two of the bursæ there is an evident deposit of chalk-stone, or, to speak correctly, of the uric compound. He has two ulcerations in each heel, and a constant secretion of this kind is taking place. The parts ache very much in cold and in changeable weather; and give him a strong warning, if gout is at hand. When, from much walking, increased tenderness has been produced, a simple bread-poultice produces relief; and, at all other times, the emplastrum saponis, spread on leather, affords a comfortable defence. Doubtless the true method of cure in such a case, is to cut away the thickened cuticle; and, arriving at or near the diseased surface, to make a judicious application of argent. nitrat.

In cases xiii, xiv, and xv, p. 347, 350, and 351, I have related how favourably an uric abscess allows of the lancet; and that it does so, even when the bursa mucosa suppurates. This treatment comes within the province of the surgeon; but the brief general history which I have given, may be useful.

In regard to the constitutional treatment in this peculiar disposition of the exhalant vessels, it seems to me very doubtful whether any medicines will be found to have a specific operation, as chemical agents; although, I confess, that, in the practice which I am about to suggest, I hold this principle partly in view. The digestive functions of those persons, in whom this morbid process is going on, are usually weak and irregular; and they are much disposed to acidity of stomach. I believe, in every instance in which I have seen these concretions, that the liver has been more or less diseased; and a corresponding treatment should therefore be pursued, when such an indication is presented.



I have adopted the opinion that the morbid action of the extreme vessels in the extremities is vicarious to the proper action of the kidneys in regard to the secretion of uric acid, as I have stated at p. 155. It is only by indirect methods of treatment that we can reasonably expect to influence the secreting action of the kidneys; and such treatment must, I conceive, consist in the direct application of remedies to the digestive functions. The mild alterative use of a mercurial oxyd; a regulation of the bowels occasionally by the use of the draught, p. 198; and now and then by a suitable aperient pill; sarsaparilla with the addition of liquor potassæ; and a course of the tepid salt bath, with regulated diet and regimen; would embrace, I believe, the most efficacious plan of treatment. I am persuaded that the patient should limit himself in the use of animal food.

An alkaline form of medicine sometimes proves useful, and I have seen advantage derived from the use of the following formula.

R. Magnes. gr. x. ad ʒi.  
 Mist. amygd. ʒxiv.  
 Liquor potass. ℥ xx. ad ʒi,  
 Syr. tolutani, ʒi.—M.  
 Fiat haustus, bis quotidie sumendus.

An intelligent gouty gentleman informs me, that many years ago, he was troubled with chalk-stones in several fingers; and that from one finger there was an occasional oozing of chalk-like matter. He adds, "that by means of a course of magnesia, taken in regular daily doses, all the chalk-stones gradually disappeared." Upon examination of the fingers, I find, at present, only a very slight trace of concretion in one of the bursæ. Patients are so often deceived in the belief of having *chalk-stones*,

in consequence of the knotted state of their tendons, or the induration of the small bursæ mucosæ, that I cannot allow myself to receive the account of this cure with implicit confidence.

In cases of this description, a steady perseverance in any means which are adopted is quite essential. In several instances of concretions which were existing in connexion with very unhealthy functions of the liver, the mild alterative course of treatment which was adopted, had a decided influence in promoting the absorption of the uric matter; and from such share of experience as I have had in this peculiar deviation from the ordinary course of gout, I can venture to affirm, that much good may be afforded by an attentive plan of medicine, and of regimen.

Sydenham, when treating on this part of the subject, makes the following observation, which, although not founded on correct pathology, deserves considerate attention: "I have experienced, in my own particular case, that not only the generation of these concretions may be prevented by daily and long-continued exercise, which duly distributes the gouty humours through the whole body, that otherwise attack a particular part; but it also dissolves old and indurated concretions, provided they do not come to such a degree, as to change the external skin into their substance."

## RETROCEDENT GOUT.



WHEN, during the existence of gouty inflammation, either in its acute or chronic form, a sudden cessation of the external action takes place, it sometimes happens that an internal organ becomes immediately and violently affected. When this event occurs in the height of a paroxysm, the symptoms are acute, and run a rapid course; but when it arises in chronic gout, they are sometimes of slower progress. In either case, therefore, the symptoms bear a relation to the previous state of the system.

The retrocession of gout in this paroxysm, constituting the case of danger of which I am now speaking, is of rare occurrence, and probably never happens except from the patient's want of care, or from some injudicious management.

The transference is most disposed to affect the stomach or intestines; or both in succession.

The symptoms which attack the stomach are exquisite pain and spasm; and sickness is an usual attendant. If the intestines be more distinctly affected, enteritis in its worst form is produced; and vomiting, which most commonly occurs, is more or less urgent, accordingly as the seat of disease is near or distant from the stomach. In either case the danger is pressing; and, unless relief be speedily rendered, *death* soon closes the scene.



If the transference take place to the brain, in its worst form, apoplexy is produced ; and, in all probability, proves of fatal termination. The head is sometimes affected with pain and distressing sensations in connection with the gouty diathesis, even before the first occurrence of a paroxysm, as is shewn in the following case.

A gentleman of the nervous temperament, previously to his first attack of gout, which occurred at the age of 27, had been for a few weeks complaining, as he expressed it, of oppression of the brain, remarkably affecting his powers of mind and spirits ; and occasionally, also, he suffered severe head-ach. He took purgative medicines, and was cupped two or three times with advantage ; but was not cured. One evening his head became suddenly relieved, and the great toe of one foot as suddenly affected with symptoms of gout. The exchange was almost instantaneous.

During the gout, the head and stomach become peculiarly affected in certain constitutions.

Persons of a gouty constitution, and especially those who have great sensibility of the nervous system, are more strongly affected from the same circumstances than others. For example, a gentleman answering to this description, states, that when suffering from indigestion, he often feels a pain in the breast bones “ as if they were being forced open.”

A lady, entirely of the nervous temperament, relates to me that she has suffered much from the head and stomach at the period of having the gout. She experienced lancinating pains of the head, and a remarkable sense of depression at the pit of the stomach. Gout taking place in the limbs, relieved all those symptoms ; but if the gout ceased, they returned again immediately.

A gentleman describes, that when his feet were in-

flamed with gout, his head was suddenly seized with intense pain and great confusion; the gout, however, not quitting the feet. He procured relief by fomenting the head with hot brandy and water, and afterwards applying flannel, so as to produce perspiration.

Dr. Cullen observes, under the division of Retrocedent Gout, that “sometimes the internal part is the heart, which gives occasion to a syncope; sometimes it is the lungs, which are affected with asthma.”

There is an apparent cause, why these organs should be less liable to be affected than the brain; namely, the greater sympathy subsisting between it and gouty parts; and more particularly from the great tendency of a determination of blood to the head, in those who have long been subject to gout; and that the alimentary canal should most commonly become the seat of the retrocedent action, might be expected from the active sympathetic connexion so often subsisting between it and the extremities, during the phenomena of gouty inflammation.

With respect to the retrocession in question to the heart or lungs, I am not acquainted with any clear facts of its occurrence. In persons who are subject both to gout and asthma, the existence of either one or the other taking place with some degree of alternation, must not be considered as a fair example of retrocession; according to the definition which I have given. In case of the lungs becoming the part affected in repelled gout, I should expect that inflammation and not asthma (unless in an asthmatic person) would be the actual form of complaint.

A question of theory has sometimes been agitated, as to the propriety of the definition, *retrocession*. Mr. Hunter observes, “I should be inclined to suppose, that



its effects on the brain or stomach are not similar to those on the extremity, or probably it does not advance so far in its effects to them; or it would certainly kill."

It appears to me an useless discussion, in a practical point of view, to argue upon the identity of the phenomena, in these particular situations. We see that the certain event follows the certain antecedent; and hence I conceive that the established opinion of an occasional *transference* of inflammatory and spasmodic action from external to certain internal parts, in gout, is clearly enough made out; and that it is important in practice, as well as admissible in doctrine.

Dr. Cullen states two other affections; the one of the neck of the bladder, producing pain, strangury, and a catarrhus vesicæ; the other of the rectum, sometimes causing pain alone in that part, and sometimes by hæmorrhoidal swellings there. He adds, "In gouty persons I have known such affections alternate with inflammatory affections of the joints: but whether to refer those affections to the retrocedent, or to the misplaced gout, I will not presume to determine."

In two patients, I have seen that chronic inflammation of the prostrate gland has been so curiously modified by the gouty diathesis, that the surgeon has pronounced the gland to be affected with gout.

That gouty persons are remarkably subject to hæmorrhoidal affections, and an irritable state of the bladder and urethra, I have already admitted and explained; but in connexion with the paroxysm, I have only observed an occasional increase of sympathy in a high degree; in which case, I conceive that the terms misplaced or retrocedent gout, as applied to such affections, express much more than is warranted by the phenomena.

In two instances I have known a painful affection of



the testes and scrotum assume a very doubtful character, so as to perplex the judgment of the surgeon for many weeks in succession; and at last entirely give way to an unexpected occurrence of acute gout.

One gentleman relates to me, that for the last three years he has been distressed with an irritable state of bladder, sometimes giving rise to urgent inconvenience; but that the symptoms were remarkably suspended by his last fit of gout. Now, he rises five or six times in the night; but at the time of the paroxysm, not more than twice. I strongly suspect that in this instance there is a calculous concretion in the bladder.

I have observed that those gouty persons who are most disposed to be painfully affected with gravel, are also the most liable to spasmodic attacks of the diaphragm or abdominal muscles; and which the patient always describes as gout in the stomach. I have seen this occurrence chiefly happen in the absence of the paroxysm, and therefore should call it a spasmodic affection, or spasm mixed with inflammatory action, in the gouty constitution, but not retrocedent gout. Some persons who have suffered from retrocession of gout in the stomach, inform me that before they were affected with gout, they were subject to occasional attacks of spasmodic pain of the stomach in a severe degree.

I remember that in one instance of *tic douloureux*, the most melancholy and severe which I ever witnessed, the occurrence of gout in the foot and knee rather served to aggravate than relieve the pain of *tic*, apparently by rendering the constitution more irritable.

Upon these anomalous forms of complaint, which are partly inflammatory and partly spasmodic in their nature, it seems both just and sufficient to consider, that a modification in the symptoms is produced by the influence of

the gouty habit. Of this point, and of the nervous character of the gouty constitution or temperament, I have already treated at some length.

The subject of conversions of diseases, or the superseding of one disease by another, is matter of curious and important inquiry. In the cases which I have recently related, I have shewn the extraordinary power of gout in suspending or removing long established morbid actions. I may add a few further examples.

A gentleman of highly irritable constitution, after an exposure of some hours to wet and cold, was attacked with erysipelas in the face. The symptoms were severe for a few days, but yielded quickly to the gout, which took place in the feet.

A gentleman, for many years subject to gout, was exposed to cold on the 4th of the month. In the evening and upon the following day he suffered from severe pains in the chest, with difficulty of breathing. On the 6th, gout began in one foot, which increased on the following day in a great degree, and his chest became entirely relieved.

J. B. has long been subject to a purulent secretion from the ear. An attack of gout which he lately had for the first time, wholly suspended the discharge; but it returned as soon as the gout quitted.

A gentleman who has suffered from gout for many years, informs me, that in the early part of his life he had occasional attacks of erysipelas; but that since the gout, he has been free from that complaint.

In some instances, from a change in the state of the constitution, gout fails to return; or is suspended by another disease, to which the individual has acquired a stronger tendency.

A gentleman was subject to gout during several years



of his life; but for the last seven, he has been affected only with asthma, which succeeded to the gout.

I proceed now to consider the remote causes in relation to the retrocession.

### CAUSES.

THE most frequent cause which produces retrocedent gout in its most genuine form, is sudden vicissitude of temperature applied to the body generally; or cold, more or less continued, offered to the affected parts.

Professor Home of Edinburgh, in his lectures, relates the case of a gentleman, who exposed himself to the influence of wet and cold, when the gout was slightly present in the feet; and on the same afternoon, enteritis followed, which in twelve hours proved fatal.

Dr. Parry informed me, some time ago, "that in the same winter he had seen two instances of extravasation in the brain, from the removing of gout in the extremities by immersing the feet affected in cold water."

A gentleman having a relapse of gout in the foot, in consequence of a strain, applied a cold lotion very freely, thinking that the inflammation being thus produced might be of the common kind; but the pain was so much aggravated, and his general feelings were so unusual, that he was afraid of internal gout, and soon desisted from its use.

Another gentleman applied to the inflamed parts a cold lotion, consisting of equal parts of alcohol and liquor ammon. acet. with seeming relief to the inflammation; but at length he felt so alarming a spasm at the stomach, that he laid aside the remedy in fear.

An elderly gentleman, severely gouty, of the nervous



temperament, on one occasion, when both feet were much inflamed, applied laudanum, hartshorn, and spirit of turpentine. He says, "that he repelled the gouty action from the feet, and that his head became immediately affected, feeling as if a wooden wedge had been driven in between the bones, and was forcing away the crown of the head. In the course of a few hours the gout returned to the feet, and the head was at once relieved."

It is with much satisfaction I state, that, in a subsequent severe paroxysm, this patient made free use of the evaporating lotion, p. 272, with perfectly good effect.

Lately, I saw a gentleman, who, when slightly affected with gouty inflammation in his feet, walked on cold damp ground; and his stomach quickly became so severely pained, that, but for timely remedy, the event would have been uncertain.

When cold is the hurtful agent, the internal symptoms which are produced are probably, for the most part, of an inflammatory nature. I have formed this opinion from such cases as have come under my own observation; and from the general information which I have collected.

The blood being checked from the surface, while the gouty diathesis is present, a preternatural determination to some internal organ succeeds; and inflammatory action arises, which is marked by the utmost intensity of symptoms, and a rapidity of course that is almost peculiar. If, however, the retrocession take place after the free employment of all the means which reduce inflammatory action, notwithstanding that cold may have been the exciting cause, the symptoms which arise will probably prove of a spasmodic nature. This appears to be illustrated in case x, at p. 334.

I must also add, that in those constitutions in which

the nervous temperament strongly prevails, symptoms of pure spasm will often arise, although the exciting cause shall have been an exposure to cold; or the influence of cold in any way applied.

Phenomena, in part similar, appear to be produced by the occasional agency of certain stimuli, in suspending the external gouty action, as in the operation of hellebore; or as seen in the effects sometimes produced by the *eau medicinale*. In cases of this description, however, the noxious cause being applied internally, there is some obvious difference in the beginning and progress of the symptoms. The increased determination of blood to the internal organ, is here the *first* event in the series of the diseased actions.

The influence of indigestible food produces one form of the disease; but in this example I have seen that the pain, which is intensely severe, is dependant rather upon spasm, than upon active inflammatory action. Sickness is a certain attendant; and I believe that the stomach, under the present cause, is always, in the first instance, the entire seat of the disease.

I must repeat my observation, that the character of the attack, as to inflammation or spasm, materially depends on the temperament of the individual; and an investigation regarding this should not be neglected. I shall presently relate some cases which exemplify this point.

Violent passions of the mind may possibly induce retrocedent gout; but I am not acquainted with any example of the fact.

## DIAGNOSIS.

To attempt a practical distinction between the internal disease of which I am now treating, and similar forms of disease where gout has not been present, or in persons not gouty, is probably both useless and improper, as it involves theoretical considerations of too delicate a nature to admit of satisfactory reasoning; while the treatment must be prompt and vigorous, and strictly adapted to the actual symptoms.

In order to possess a power of correct discrimination upon the question, whether the case shall be considered simply as one of spasm, or of spasm and inflammation mixed, or of pure inflammation; our minds should be thoroughly stored with sound principles of pathology. Useful conclusions may be derived from a reference to the exciting cause, on the principles which I have stated. In an attack purely spasmodic, the rigidly contracted state of the abdominal muscles, and the relief which is afforded by strong pressure, are very distinctive. When it is purely inflammatory, the tender state of parts to the slightest weight or pressure; the more regular diffusion, yet greater fixedness of the pain; the sympathetic fever which is instantly produced; and indeed the very physiognomy of the patient in the comparative situations of attack, will, to the experienced practitioner, be a description of the nature of the disease. The state of the pulse, as whether small and indistinct, or full and oppressed, or in vigorous action in any way, will materially direct the judgment; and the state of the skin and features, whether cold and collapsed, or in contrary states, is a



guidance of importance. Dr. Cullen and authors in general appear to have considered it as a settled axiom of practical doctrine, that debility and spasm, and not inflammatory action, seize the internal organ in the case of retrocedent gout.

A perfect conviction prevails in my mind, that, in a genuine example of retrocedent gout to an internal organ, inflammatory action is the more common occurrence, and that spasm alone is comparatively rare. The mixed action of spasm and inflammation may, however, be expected to happen still the most. In reference to inflammatory attacks, we see that many of the cases related by authors have evidently terminated in gangrene\*.

### OF THE TREATMENT.

In conformity to the state of the fact which I have been now discussing, the means of practice are to be determined.

The life of our patient hangs on the discrimination which we exert. In every case of retrocedent gout, Dr. Cullen† has directed a treatment entirely stimulat-

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\* Morgagni, Ep. 57.—Rush's *Inquiries and Observations* vol. v. p. 153.—According to these authorities, the *black vomit* occurred before death. In the Hunterian Museum there is a preparation (No. 52) of a gouty stomach, thus described: "A specimen of a portion of the œsophagus and stomach of a person who died suddenly of the gout in his stomach. There was considerable inflammation, even, in some places, to the extravasation of blood."

† Having spoken of strong wines joined with aromatics, and to be given warm, when the stomach and intestines are the

ing; and probably the same doctrine is prevalent in the schools of medicine, and consequently in general practice.

It is to be admitted, that in some particular constitutions, or in certain nervous states of the constitution of any individual, simple *spasm*, either affecting the stomach or the diaphragm, of the most intense kind, is the instantaneous or speedy effect of some offending agent, accompanied with an abatement or cessation of the gouty inflammation in the extremities. In this case the patient usually feels some benefit from strong pressure applied to the stomach and abdomen; and the pulse is contracted. He almost instinctively flies to brandy, or hot brandy and water, for relief; and, in such an example as this, most probably with every advantage. In an urgent attack of this kind, the state of the patient appears indeed truly alarming; and the most powerful remedies at hand are felt to be the only expedients to save life. It is really surprising how little susceptible the stomach proves to the most powerful stimuli, when in this state of gouty spasm. I am acquainted with some striking instances of this kind, in which the stimulant practice, carried to a free extent, succeeded. Even a whole bottle of brandy has been drunk at once, without producing the least feeling of intoxication. This description, however, of pure spasm, in my opinion, forms the only exception to a very different general rule of practice, which I would propose in opposition to that laid down by Dr. Cullen.

If retrocession have been excited by indigestible food,

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seat of disease, he adds: "If these should not prove powerful enough, ardent spirits must be employed, and are to be given in a larger dose."



the sickness which is present, and the appearance of the rejected matter, point out that the vomiting should be promoted. An emetic of ipecacuanha is well adapted for this purpose; and its operation is to be assisted by draughts of warm water in the usual manner. If the pain be thus relieved, the bowels should next be acted upon, and five or ten grains of calomel should be given as an immediate dose. As soon as the stomach can retain a purgative medicine, the draught, p. 198, may be given every three hours, until a full operation is produced; or the combination of sulphate of magnesia and infusion of senna with an aromatic tincture, may by some be preferred. Whatever medicine of this description may be chosen, the dose should be repeated at short intervals, until a full effect is produced. The aid of an injection will occasionally be required. If, however, violent pain should still continue, after the stomach has been cleared of its contents, tincture of opium, in a dose from forty to one hundred drops, may be given without hesitation: it must be repeated also in free doses, at an interval of half an hour, or an hour, until pain and spasm cease, or satisfactorily abate; and at the same time, purgatives which will have their effect delayed but not prevented by the opiate, must, on no account, be omitted. Pills of calomel, and the compound colocynth extract, constitute the form of active remedy which is most to be recommended; and the fluid purgative should follow their administration.

Fomentation of the bowels by means of flannels wrung out of hot water, or by a camomile bag prepared in the usual manner, forms a very useful part of treatment.

When the pain has ceased, and the circulating and nervous powers have so far recovered, that the *re-action* of the system produces its effects, we should be upon our



guard, lest inflammation take the place of spasm, and insidiously prevail, unseen and unrelieved.

When exposure to cold, or the influence of cold in any way, or violent stimuli, have been the exciting causes of injury in a patient whose circulation is strong; and in proportion as his habit is plethoric, we have to expect that the disease will be inflammatory; and, accordingly, as the symptoms are marked and violent, sixteen, twenty, or thirty ounces of blood should be instantly taken from the arm; the quantity and repetition being adapted to the several indications and circumstances. The inflamed bowels must be treated, as in ordinary enteritis, with equal promptness and decision. The rules of practice, in relation to this point, are too well known to require being detailed. With regard to collateral treatment, however, something further may be offered. The attempt to solicit back the gout to the extremities (or, probably, in more correct language, to divert the diseased action from the vital organ by remote excitement) will be made with great propriety by sinapisms; or by topical warmth to the limbs; as by a stimulating fomentation; a pediluvium of hot water simply, or containing mustard and salt; by warm covering, and such means; but to the bowels themselves, as in the treatment of common enteritis, I have on those occasions when great tenderness of the surface has existed, been induced to prefer the use of a *tepid* application to one of a higher temperature. With this view, upon the principle of evaporation, the lotion of camphor and alcohol (p. 272) applied tepid, or at that temperature which is felt to be the most comfortable, constantly and universally to the abdomen by means of folded cloths, constitutes a remedy which may be adopted with advantage.

In some cases of severe enteritis, I have had decisive

proof of the superiority of its effects over the ordinary method of hot fomentations.

If the pain of the abdomen continue after the prompt employment of bleeding and the other means just stated, a large blister should be applied. This is a remedy of great importance, and, in an urgent case, it should be had recourse to with the least possible delay.

In those instances in which the general powers of the circulation are weak, in connexion with visceral inflammation, local cupping may be preferred to the more general detraction of blood; or when this valuable remedy cannot be conveniently put in practice, the free use of leeches must be the substitute.

In reference to the fact, that gouty persons, in the intervals of their fits, are sometimes seized with violent pain at the stomach, and spasm that seems to threaten life, the most powerful stimuli alone giving relief, I must remark, that such occurrences are not examples of *retrocession*.

A lady, possessing the true nervous temperament, just as she was convalescent from the paroxysm, imprudently exposed herself to the evening air, walking on damp ground. Soon after entering the house, she was seized with sudden and violent spasm of the diaphragm. She was free from sickness, but breathed with exceeding difficulty. She thought "that she should have expired with the pain." She took hot brandy and water, and applied warmth to the feet, with speedy relief.

If apoplexy be the disease which succeeds to the retrocession of gout, copious bleeding, to the extent that the pulse permits, is the only remedy which can save the patient; and if no rupture of vessel have taken place, it will most probably be effectual. Cold water, or, with still more effect, a cold evaporating lotion, freely and



constantly applied to the head by means of folded cloths; and warmth and stimulus to the feet, according to some of the methods already stated; form important aids of treatment. To speak of purgative means, and the general management, would be only to repeat the well-known rules of general practice, and to fatigue the attention of the reader.

Should the viscera of the thorax be affected, the usual principles of practice are to be followed.

The following cases will serve to shew the distinction between the symptoms of spasm and inflammation, and the relative treatment which is to be employed.

### CASE I.

S. R. aged 47, corpulent, of bilious diathesis, and of the nervous temperament in a most exquisite degree, was first attacked with *acquired* gout in the external part of the foot at 22. Seven years ago, he took the eau medicinale, in the dose of half a bottle, two nights in succession. It did not materially relieve the pain, and induced a feebleness of limbs almost amounting to paralysis. He never afterwards recovered the comfortable use of them, which on all former occasions he had done. He has suffered from gout to a degree of martyrdom; and when under the influence of the paroxysm, his nervous system is affected in the most distressing degree; having, together with intense pain, unaccountable horrors and apprehensions. Seven months ago he was advised to discontinue the use of wine, which he had been in the habit of taking regularly, and often convivially. He felt the loss of this cordial stimulus in a very sensible degree. He said, expressly, that his nervousness was so much in-



creased, that he was afraid to meet a friend. He would prefer to turn away, in order to avoid conversation. At this period, therefore, seven months having elapsed, he was exposed to wet and cold, and the feet were slightly wet. On that day he did not suffer inconvenience; but on the following night, having only a slight degree of gout in the feet, he was suddenly seized with excruciating pain in the stomach, and such an oppression from flatus, that he thought the stomach would actually burst. He was relieved from these alarming symptoms by the use of hot brandy and water; æther and opium; and fomentations of hot water applied to the stomach. A severe paroxysm of gout in the feet and knees soon followed. I saw this gentleman, on a subsequent occasion, under the influence of spasmodic symptoms, which were induced by cold. An extraordinary torpor appeared to have come over the whole frame. The pulse was very slow and languid; the skin was cold; the features were collapsed; the expression of the countenance was that of terror mixed with a degree of insensibility; the breathing was laboured; the muscles about the throat and trachea were so much affected, that the act of swallowing and speaking was rendered very difficult. Stimulants, as on the former occasion, were here employed with success. Towards the relief of a severely painful state of gout in the limbs, for which, soon after, I had occasion to prescribe, the application of the poultice made with the evaporating lotion agreed perfectly, and was very beneficial; and also the occasional sponging of the part with the warm lotion had a good effect; but with a patient of such peculiar tendency to retrocession, I would not adopt my usual method of more active evaporation. This was a case of exception to the usual management of the paroxysm in regard to diet; as I found it expedient to

allow the use of Madeira daily, to the extent of two or three glasses, even during the height of the painful symptoms.

## CASE II.

R. C. æt. 52, of the nervous temperament, was for the first time affected with gout in the foot at 31. When the symptoms were yet urgent, after eating rather heartily and drinking cold Madeira and water, he was for a short time exposed to cold air. He was suddenly seized with cold perspirations in the limbs, attended with a sense of heat arising up from the bowels, and an alarming oppression affecting the breath, but unattended with any pain. The foot became immediately easy. He experienced a slight degree of sickness; but he was most alarmed with sensations of sinking, to the degree even of apprehending a fatal fainting. The palpitation of the heart was excessive. He drank warm water as being the readiest expedient, and produced vomiting. Much acid matter was rejected from his stomach, and with immediate relief. The attack in question ended with a return of active gout to the foot. On a subsequent occasion he suffered in a similar manner in the paroxysm. About seven in the evening the pain in the foot was very severe. At twelve, having suffered much from pain and restlessness, his stomach was suddenly seized in the same manner as before, and with the former attendant nervous sensations. His foot was as immediately relieved. Without delay he took an emetic; and, discharging from his stomach a large quantity of acid matter and mucus, of green appearance, he became relieved. In the morning the gout again took possession of the foot.



In this case, the timely employment of purgative treatment would, in all probability, have prevented these attacks; which, if not attended with real danger, were highly alarming to the patient. He had not interfered with the natural course of the gout.

### CASE III.

C. A. aged 64, of full habit and inclined to corpulence, of bilious diathesis, and of the nervous temperament, was affected with hereditary gout first at 63, and has suffered no less than six attacks within twelve months. Much subject to cramps in the legs. Formerly had jaundice, with such urgent symptoms, that obstruction of the duct by a gall stone was apprehended. After having pursued a course of medicines at home, he went to Cheltenham, and derived much advantage from the water in regard to the bilious obstruction; but injudiciously continuing to take it without intermission for five weeks, he brought back his dyspeptic symptoms, which proved very troublesome. Previously to his first attack of gout, he laboured under a very troublesome state of dyspepsia, a cutaneous complaint, and cough. He hailed the arrival of gout, therefore, as an expected remedy for such complicated indisposition; and would not, of course, interfere with its progress. Observe, however, the failure of Nature to relieve the constitution even by the influence of six paroxysms of gout in one year! and, in the last, the stomach became affected as follows.

The usual symptoms of gout in the feet had continued about a week. They were attended with dyspepsia and some vertigo. He had taken a purgative medicine; had fatigued himself by over-exertion; and at his dinner had



eaten more of solid food than was judicious. He was awoke about three in the morning with a sense of cramp at the stomach, and a hiccough which continued for several hours. He became relieved on the following day, but felt much languor and depression. In the evening he complained of general coldness, which was soon followed by an urgent sense of oppression at the stomach, feelings of cramp across the diaphragm, hiccough, and a degree of burning in the chest. The complexion was rather jaundiced. His immediate symptoms were relieved by a mixture consisting of conf. aromat. mist. camph. sp. ætheris sulph. comp. et tinct. sennæ; but the most sensible advantage was obtained from the active operation of a calomel purgative. The attack returned for two or three nights in an abated degree. Each time it was unattended with sickness. It left a considerable soreness about the stomach. The appearance of the excretions fully pointed out the necessity of purgative treatment; and in this, the radical cure consisted. The gout in the feet gradually declined; and I should observe, that no local treatment had been used. The active use of remedies was followed by the adoption of an alterative course of medicine; and at the end of a month this gentleman was perfectly recovered.

#### CASE IV.

A gentleman, aged 50, of the nervous temperament, was first affected with *hereditary* gout in the great toe at 30; and every year since has had one or two severe fits. Towards the close of the last attack, he imprudently applied a cold lotion to the foot; and almost immediately experienced a severe pain in the chest and in the shoulder.

He drank hot brandy and water, with speedy relief. Two days after, most inadvertently, he again used a lotion cold, and with the same consequences. He then resorted to a powerful dose of essence of ginger, which caused an expulsion of flatus from the stomach, and afforded relief to the pains. He obtained, however, his more decided amendment, and final cure, from the steady employment of aperient and alterative medicines, used in conjunction with regulated regimen.

### CASE V.

L. S. aged 52, rather plethoric, but of the nervous temperament, was first affected with hereditary gout at 29. He has been subject to cramps in the muscles of the legs. On one occasion he applied twelve leeches to the feet, and, during the promoting of the bleeding in the usual manner, he was suddenly seized with an excruciating pain at the pit of the stomach. He instantly, as if by instinct, drank half a pint of brandy, and with immediate relief. He next encouraged the gouty inflammation in the foot, on the principle of keeping the disease in that part. Lately he exposed himself to a cold east wind, unprotected by a great coat. Rheumatic pain immediately affected the shoulder and scapula, and gout followed in a few days. He states that toothach, without any previous exposure to cold, has, more than once, preceded a paroxysm.

He relates, that on another occasion, after a tedious fit, he reduced his regimen to a great degree of abstinence, and suffered a severe spasmodic attack of the stomach, which yielded to a draught of brandy. This gentleman has often laboured under distressing symptoms of dyspepsia, and also has had frequent attacks of bilious obstruction.

## CASE VI.

R. G. aged 65, corpulent, plethoric, and of the mixed temperament, was first affected with acquired gout at 23; and since has been a severe martyr to the disease. At the close of a long paroxysm he exposed himself to cold, and soon experienced an intense pain of the head, with great confusion and occasional delirium. In addition to the use of purgative medicine, he was bled largely from the arm. The head became relieved; but next the abdomen was affected, the pain being severe, and the tenderness even to slight pressure was so great as to point out the presence of inflammation. During these symptoms gout suddenly and entirely quitted the feet, and did not afterwards return. The bleeding was freely repeated, and he was also cupped upon the abdomen. A very large blister was next applied. These means, with the continuance of purgative medicine, soon effected a removal of every alarming symptom.

## CASE VII.

R. B. aged 50, corpulent, plethoric, and of the mixed temperament, was first affected with *hereditary* gout at 22, in the ball of the great toe. Has since been a martyr to the disease. Two years ago he first resorted to Reynolds' tincture, which, for a few trials, relieved him considerably; but his relapses became so frequent, that he lost his confidence in the medicine. Since the use of it he has found his stomach remarkably weak, and subject to the sensations which he calls spasm. Four months ago, when a paroxysm of gout in the feet had first ceased, and when



weakness only seemed to affect the limbs, he remained for a considerable time in a cold apartment, and was suddenly seized with a pain at the pit of the stomach, which gave him the sensation of being tied at that part with a strong cord. He drew himself in, and pressed his stomach with both his hands in the most forcible manner; using such and other muscular actions as this kind of spasmodic pain makes instinctive. He drank, in quick succession, eight tumblers of hot brandy and water, rendered still more stimulating by the addition of essence of ginger. He very soon obtained relief by this treatment.

A month since, I was first consulted by this gentleman, and found him lying in very severe pain, which affected the greater part of the abdomen. Gouty inflammation had existed in the feet and knees about a fortnight. As on the former occasion, he had been in a cold apartment. The gout had suddenly, in a considerable degree, quitted the extremities. The pulse was hard, full, and strong. Now he took pains to reverse all the former actions of his muscles; and he lay upon his back with his knees a little bent. The abdomen was very tender to pressure. Bleeding from the arm, cupping upon the abdomen, and afterwards a large blister, with the use of pills of hydr. submur, pulv. jacob. extr. colocynth, compos. and the draught, p. 198, so freely administered that the bowels were kept in free action, were the remedies employed. I must add, however, that, for the purpose of removing the pain and soreness which remained, he took, with great advantage, the anodyne pills, p. 240, at stated intervals. An increase of gout at first affected the limbs, but this yielded to the influence of alterative aperients; and the patient recovered in the most favourable manner.

## CASE VIII.

T. N. aged 55, disposed to occasional plethora, and of the mixed temperament, when affected by acute gout in one foot, took an active dose of calomel and James's powder. It appeared from what occurred, and from reference to a former occasion, that James's powder disagreed with this patient in a peculiar manner, producing excessive perspiration and faintness. Being accidentally out of bed, and when perspiring profusely, he fainted away, and was thus exposed to cold. In the course of the day a pain came on at the pit of the stomach, passing through to the back. He ate some light animal food at dinner; soon after, he was seized with vomiting, but this did not give relief. Mustard cataplasms were applied to the feet, although the gout had not receded from the affected part. The stimulating treatment was adopted very actively, and, in quick succession, hot brandy and water, antispasmodic medicines, hot fomentations, and the hot bath, were administered. The pain, however, continued, and the soreness of the abdomen very much increased. In this extremity, he was bled very largely from the arm, and with such immediate relief, that it almost proved a cure.

From a review of these cases, it appears that, even when inflammatory action affects the abdominal viscera in the gouty patient, the symptoms have a different disposition from that which belongs to the same form of disease in one not gouty; and it is in our power to administer opium after depletion by bleeding, and the use of purgative medicine, when in other cases such practice would be inadmissible. The present examples point out how much the character of the retrocedent action is influenced by the temperament of the patient. The cases



which I have offered would seem to shew that spasmodic action is of more frequent occurrence than the inflammatory, in contradiction to my first position ; but I repeat, that in the most genuine form of retrocedent gout, namely, when the inflammation suddenly quits the extremities in consequence of the influence of cold, in a patient not previously reduced by treatment or by the continuance of disease ; and, more especially, if the temperament be more of the sanguineous than the nervous kind, the internal diseased action will be that of inflammation distinctly, or inflammation mixed with spasm. It appears to me of great importance that the rule of Dr. Cullen, to treat retrocedent gout with powerful stimulants, should be protested against, as absolute ; and that the danger which may appertain to such practice should be pointed out.

I ought, in justice to my own method of treating the paroxysm of gout, to add, that, in the cases of retrocession which I have here introduced, most of the patients have come under my care when affected with the regular acute symptoms, and have made use of the lotion and the other several means which I have detailed, without the least disadvantage, or any threatening of retrocession. I have been led, therefore, to conclude, that the chief cause of the retrocedent action has consisted in the neglect of proper purgative and alterative treatment ; in conjunction also with that injudicious use of stimulating diet, which places the patient in a state of morbid excitement, and creates the tendency to transference of disease from parts without, to that particular organ within, the functions of which are in the greatest degree disturbed from the healthy course.

As an example of visceral inflammation supervening on the symptoms of chronic gout, and of the treatment



which was successfully employed, I shall relate the following case :

### CASE IX.

J. G. aged 58, tall, robust, and corpulent ; has a circular chest ; is very plethoric ; of a sanguineo-nervous temperament ; of bilious complexion ; of free habits both in eating and drinking ; formerly, when he lived in families as butler, indulging in wine ; but of late years in porter and spirits ; not subject to other diseases ; gout unknown in his family, although a numerous one. Has for many years suffered much from occasional cramps, both in the legs and the abdominal muscles ; and sometimes, also, with spasm of the diaphragm. He became gouty at thirty-five. First attacked in the great toe of one foot only ; but since, in knees, hands, and elbows ; and adds, that in the paroxysm his head has sometimes been painful, even to delirium. Some fits warn him of their approach by unusual depression of spirits, and by uneasiness and increased weakness of the joints. Other attacks make their invasion after midnight, when he has gone to bed in seeming health. Of late years has had a fit, both in autumn, and in January or February. He states that cold is the usual exciting cause. The disease has become more and more severe in its progress.

In January last, was attacked in the feet successively, and in the hands afterwards. No crisis formed in this paroxysm. The symptoms, during the month preceding the attack now to be described, had been entirely chronic ; the inflammation and pain also changing place frequently. Describes that there was much œdema in the feet, and above the ankles, and also in the hands ; much numbness

of parts, and coldness and heat sometimes alternating; spirits extremely depressed; appetite good; bowels irregular; the fæces foul and slimy. Under these circumstances, his limbs being more free from complaint than usual, he exposed himself, unprotected, to a cold east wind and rain. I found him at night, on the 20th of March, 1815, complaining of severe pain at the stomach, with considerable difficulty of breathing; the right hypochondrium and epigastric region tender to pressure. He related, that, for three or four previous days, he had been troubled with colic pains and a disordered state of bowels. On this day he had been costive. Urine scanty and high-coloured, depositing much pink sediment. The tongue much furred. Had been vomiting green acid matter, and was still sick. There was much abdominal fulness. The pulse 84, very full and strong; the veins generally much distended; the skin hot and dry. The complexion was considerably jaundiced, of a blackish yellow hue. He was immediately bled to 3xvi. He took first an emetic of ipecacuanha; afterwards five grains of calomel; and a purgative draught of sulphate of magnesia, infusion and tincture of senna, every four hours. Thin gruel was ordered freely; and tea only in addition with a little bread.

On the following day, 21st, much relief had been obtained. The blood had a thick buffy coat, with strongly contracted edges. Much slimy matter had been discharged from the stomach; and the fæces were dark and offensive. The skin remained hot, and the pulse was not abated in fulness or frequency. The bleeding was repeated to the same extent. The draught at p. 198, was directed every four or six hours; and the pills, according to the formula, p. 297, at bed-time.

On the 22d, reported that some pain had returned at

the stomach on the preceding night, but less urgent. The draught continued.

On the 23d I found that he had passed a severe night. The pain, preceded by excessive coldness of the extremities, returned early in the evening, and got to its height about 2 A.M. No sickness, and the bowels freely open; now some discharge of fresh-secreted bile; but previously the appearance had been muddy, or sometimes like yeast and water. A deep inspiration was painful to the right hypochondrium; some cough was present; a severe sense of heat was felt at the stomach.

The pulse was yet full, but abated in its action. The bleeding was repeated; the medicines were continued; and to the pills a grain and a half of crude opium was added. A large blister was applied to the parts affected with pain.

On the evening of the 24th he was considerably mended. Had procured much sleep in the preceding night, and had been free from pain through the day. The pulse 80, calm and soft. The limbs warm, and the whole skin of comfortable temperature. The blister had acted with sensible advantage. The blood appeared firmly coagulated, and was contracted; but less sizzly than before. The secretions had been of variable appearance, but for the most part as already described. The draught was continued, and the pills, with the intermission of a night, were repeated. Some broth was added to the diet. Two days were passed in great amendment; and the slight pain which returned was at night, at the same time that he was formerly accustomed to feel the accession of gouty pain in the limbs. At this period the hands and feet were almost free from inflammation, but were swollen, tender, and weak.



On the 27th I found that he had experienced a severe relapse, at the usual time of the night (about 1, A. M.) without any apparent cause. Said, that the bowels had been "drawn into balls," with excessive pain. The fæces continued foul, and the urine now, still more copiously than before, deposited pink and mucous sediment. He bore pressure on the abdomen much better than formerly, but it still produced some pain. The day was passed in ease. The pulse being yet full, the bleeding was repeated to  $\text{℥xiv}$ . The medicines were continued.

Now, as on the former occasions, he bore the bleeding well, and received sensible relief. The blood was still firm in its coagulum; but less so than before, and was free from the buffy coat.

On the 29th his amendment was very satisfactory. No pain had returned. Pulse calm and soft, at 76; skin cool; tongue becoming clean; urine lighter in colour, and with little sediment; the fæces of improved appearance, but still unhealthy; he bore abdominal pressure without complaint. The complexion yet retained some of its jaundiced hue.

A draught of magnes. sulph. infus. rosæ et tinct. calumb. was directed twice a day; and the compound calomel pill (five grains) every other night. Each night  $\text{ʒij}$  unguent. hydrarg. fort. to be rubbed upon the right side. The diet to be gradually and cautiously made more nutritive.

From this date he became steadily convalescent; and the secretions by degrees returned to a healthy state. After the first week from its being adopted, the mercurial friction was employed only on alternate nights for about a fortnight, and then relinquished. The mercurial pill

was taken for a fortnight, as above mentioned. Then increased attention was given to the weakened limbs; and a strict future regimen in every particular was enjoined. The bowels to be regulated by pills consisting of gum gambog. pilul. hydrarg. pulv. alöes comp. et sapo durus. I shall subjoin a statement of the comparative properties of the urine at different periods.

March 27th.—It copiously deposited pink and mucous sediment. Its specific gravity (see Exp. xix. p. 131) 1·0207. Four ounces afforded of phosphoric acid 4·1 grains.

In the middle of April the urine was light, transparent, and free from all sediment, except the mucous cloud of health; its specific gravity 1·0087.

In February, 1816, the health appearing almost established, but the digestive functions still occasionally disturbed, I made the comparative examination of the urine (see Exp. xx). It was of an orange colour, with much mucous cloud, and an abundant deposition of uric crystals; of specific gravity 1·014. Four ounces afforded of phosphoric acid 2·1 grains.

In a review of this case, we observe a plethoric state of the system existing, to which a long course of gout had brought no effectual relief; a vitiated condition of the secretions become exasperated and confirmed; and then, under exposure to cold, visceral inflammation, chiefly affecting the liver, was produced. From the pain occasionally extending itself to the stomach and intestines, we may infer that the inflammation was chiefly peritoneal. The intervals of ease occurring almost regularly in the day; and the exacerbations at the usual time of night, when the pain of gout always most affected him; form an example of the modifying influence of the gouty diathesis over internal chronic inflammation—producing

a case, which may, with apparent propriety, be denominated chronic retrocedent gout.

I did not see this patient in the interval of April 1815 and February 1816. At this last date his countenance had a clearer and more healthy appearance than before. He reported that he had for the most part enjoyed comfortable health during the above period; and had been free from gout.

I may add the following short case, which instructively represents the nature of a spasmodic affection of the stomach, in immediate connexion with obscure gout in the feet; and so alternating, that it seems to come under the head of chronic retrocedent gout.

### CASE X.

A gentleman, aged 54; slight; with small vessels; of the nervous temperament; was first attacked with acquired gout at 29; has suffered many bilious attacks, and from his complexion bears the stamp of having an unhealthy state of liver. He is sensible of pain when pressure is applied to the right hypochondrium. Exposure to a cold wind, or the act of standing on a damp pavement, very quickly produces pain of the stomach. Has been subject to feel pains in the stomach in alternation with pain in the ankles and feet. For the last fortnight he has been much indisposed in this manner. He goes to bed at nine, and falls into a comfortable sleep. About twelve or one, has for the last fortnight very regularly awoke with violent pain in the epigastric region, shooting up the sternum, accompanied by spasms, urgent flatulence, and heartburn. No difficulty of breathing. The pain relieved by pressure. It remains four hours;



and, being then at its height, gradually declines ; and towards morning, ease and sleep return. One night he discharged much bilious matter from his stomach. Lately has had slight gnawing pain in the ankle and tarsal bones of one foot, and two nights ago, “ much twinging pain in the ball of the great toe.” Yesterday he took an active purgative, and to-day makes the following report :

“ I went to bed at my usual time, and awoke about twelve with some pain in the right ankle, and a sense of heat, throbbing, and stiffness, about the ball of the great toe, but without any affection of the stomach, except a little heartburn. The symptoms continued during two hours. I then fell asleep, and rested well. This morning I do not find either pain, discolouration, or weakness in the parts so recently affected.”

The treatment of this case evidently consists in the employment of means to restore the health of the digestive organs, by suitable medicine and regimen.

## OBSERVATIONS.

I shall avoid stating a greater number of cases in detail, and content myself with a few more practical observations on this part of my subject.

In those examples of painful affection of the stomach taking place at night, and continuing till towards morning, whether gout in the limbs be present or not, the plan of treatment must consist in the use of free evacuants ; and I have always found success from the employment of calomel, opium, and compound extract of colocynth at night, and a draught such as first described at p. 198, or the one at p. 201, two or three times a day. Sometimes

it proves necessary to apply a blister to the pit of the stomach, as an auxiliary agent to the medicines.

In those instances of ophthalmia, which I have seen to be connected with gout, a similar plan of evacuation by the alimentary canal has been the successful treatment. Local cupping has also been necessary. As a topical application, most benefit has been derived from the free use of the poppy fomentation.

In two very important cases of mania occurring in gouty persons, I found the usual principles of treatment prove perfectly successful. The symptoms had been produced by habitual intemperance. During the progress of the complaint, in each instance, gout took place in the feet, and it was left to its own course; but I did not perceive that it had any tendency to ameliorate the symptoms affecting the head.

It sometimes occurs, that during the influence of a gouty paroxysm, the brain becomes affected with an oppression which seems to threaten apoplexy or paralysis. In one case of this description, the symptoms of gout in the extremities abated at this juncture, although there was not any positive retrocession. Much delirium took place. The patient was advanced in years, and debilitated, and could not support any loss of blood, so that the means selected were a blister to the neck, increased warmth to the extremities, and cordial purgatives. This gentleman quite recovered.

In another case, the patient, a very corpulent person, for many years very subject to gout, having a slight degree of inflammation in one foot, was seized with symptoms of comatose oppression. It appeared that he had been complaining for a week before of giddiness and loss of memory. An emetic was administered with advantage; a large blister was applied to

the neck; and cordial sudorific medicines were prescribed, in order to produce a free action of the skin; for a spontaneous diarrhœa had taken place, so that aperients were not required. The pulse was 120 in the minute, and rather labouring; and there appeared to be a remarkable state of exhaustion and of irritation. Therefore I decided that no blood should be taken away either generally or locally; and the determination proved correct. It turned out that the inflammation was erysipelas. The patient soon lost all the alarming symptoms and recovered favourably. The sunk pale countenance in this case indicated a threatening of paralysis, and not of apoplexy.

Of cases of apoplexy occurring in the paroxysm, and successfully treated, I shall state concisely two examples:

### CASE I.

J. M. aged 60, robust, of sanguineous temperament, corpulent, and very plethoric; has suffered severely, at short intervals, for ten years past. Had been under the paroxysm about a week, one foot being much inflamed and painful, and the other about to be affected. He had kept the parts wrapped in flannel, and had not restrained himself in diet; from an idea that the gout should be *encouraged* in the feet. He had also allowed the bowels to be costive.

In the morning, while in the act of stooping to adjust his dress, he fell upon the floor in a fit of apoplexy of alarming violence. Instant relief was at hand. Twenty ounces of blood were taken from the arm by a large orifice, and active purgative treatment was adopted and continued. Every bad symptom was quickly removed,



and no paralysis followed. The gout continued in a mild form only. The ordinary treatment of the constitution, as in apoplexy unconnected with gout, was steadily continued with complete success.

## CASE II.

F. L. aged 63, of very similar make and constitution to the foregoing. Gouty during the last twenty years. Had been gradually increasing in corpulence; and used of late only passive exercise. The bowels were costive; and the secretion of urine, though irregular, was for the most part very deficient. The gout was severely affecting one foot. It had been nursed in flannel. As in the former case, the diet was indulgent. Soon after dinner he was seized with apoplexy. Blood was freely taken from the arm; a stimulant injection was administered; a large dose of calomel (10 grains) was given as soon as it could be forced down, followed by sulphate of magnesia with infusion of senna, &c. in repeated doses. In four hours, although the bowels had been freely emptied, and depletion had been abundant, the pulse was strong and throbbing, and the head was painful and confused. Twelve ounces of blood were then taken from the jugular vein; a cooling lotion was freely and constantly applied to the head; the purgative treatment was pursued; and the diet was restrained so as to afford but little nourishment. Gout confined itself to the foot, and continued with moderate symptoms, for a short time. The patient recovered without any unfavourable consequence. In these cases, the disease of the brain could not be considered an act of gouty retrocession; for the inflammation in the extremi-

ties was not suspended at the moment of attack, and became abated only from the active depletion which was adopted.

It should rather be stated, that the mismanagement of the patient had induced a plethoric state of vessels, too predominant for an effort of nature to afford relief by the gouty action; and aggravated also in the determination of blood to the brain, by error of diet; by the influence of heat in clothing; and by neglect of the alimentary canal.

I have met with instances of gouty persons, between the fiftieth and sixty-fifth year more particularly, who have ceased to have their usual attacks of gout, and have been irregularly affected with nervous symptoms, in so remarkable a manner that they have entertained the idea that gouty matter has been wandering over the frame, without fixing upon the individual part on which it should exclusively exert its action. In some such examples the head is affected with pain and confusion; the eyes with occasional sense of mist or rather disturbance of vision; the ears with unnatural sensations of noise, as the hissing of a tea kettle, or the sound of a bell, or a slighter but more continued ringing. When the head rests on the pillow, a distressing pulsation is felt. In more urgent cases, this beating affects the head also during the day. I have known the patient to express the curious idea of the hair starting up to a point, and causing a feeling of soreness at the part. Upon any agitation of mind, or over-exertion of the bodily strength, the heart will partake in this nervous disturbance, and be affected with palpitation.

I saw a gentleman labouring under most of these symptoms in a very urgent degree. He was aged 60, and had been subject to gout since 25, till about five

years ago ; when, for the relief of symptoms affecting the brain, which were supposed to threaten apoplexy, he was bled, within a short time, to the extent of 150 ounces. This was certainly an injudicious use of a remedy, only proper within certain limits. No gout has ever taken place since this large depletion, but he has suffered extremely in his general feelings. When I saw this patient, affected as I have described, his lower extremities being also remarkably cold, I prescribed alterative and aperient medicines, a pediluvium of hot water containing mustard and salt to be used daily, and a stimulating embrocation to be diligently rubbed in afterwards ; a supporting diet ; and the avoiding of all anxious and fatiguing exertion. By these means he was speedily relieved ; and by a removal into the country, and still following up the use of medicine and careful regimen, he was happily restored.

A patient of slight form and nervous temperament, reports to me the following remarkable form of complaint which he experienced.

After exposure to wet and cold, he suffered from symptoms of inflammation of the lungs. He was bled largely in the morning, with immediate relief to the chest. In the afternoon gout seized the knee. At night the pain suddenly quitted the knee, and his head became affected with extreme confusion, followed by delirium, and entire loss of vision. These alarming symptoms continued many days, and were attended with an anasarcaous swelling of the limbs. The head was but little affected with pain. The active use of purgative medicine removed the symptoms. On first recovering his sight, he found, on attempting to read, that all the letters were reversed.

It occurs to some gouty persons of the nervous temperament, and not in particular to those in years, to be



affected with sudden colic upon accidental occasions of exposure to wet and cold, or of disagreement from acid fruit, or some article of diet. It almost invariably happens, that, in these attacks, the action is spasmodic and not inflammatory; and it is a frequent result that some strong stimulant, as hot brandy and water, or compound spirit of ammonia in hot water, gives relief. But an evacuant should be used afterwards. If the stomach itself be disordered, as would be shewn by much sickness being present, an emetic of ipecacuanha should be first administered; and next a dose of calomel with an aromatic purgative; or, if the emetic be not required, the latter remedy may be used alone. The bowels can scarcely be acted upon with too much freedom. I will not omit to mention, that, in conjunction with the purgative treatment in these cases, if the symptoms should proceed, anodyne medicine is materially useful for the relief of pain, irritation, and restlessness. I have found very satisfactory effects from the pill described at p. 240. It is a safe, and often an important practice, to abstract some blood from the tender part of the abdomen by cupping. Although the attack be not in its original nature inflammatory, yet the continuance of pain causes more or less of congestion of blood in the affected part. The application of a large blister as a subsequent remedy to the cupping, will sometimes be demanded. The intensity of pain and spasm has yielded to the immediate remedies employed at the early moment of alarm; but it may happen that the symptoms are really continued, although so much subdued in violence. We must therefore keep a watchful eye upon the case.

The patient very naturally conceives that his colic is a certain attack of gout in the stomach; or that gout is affecting the head, if that be the disordered part. He prays

for the return of the gout in the extremities; and feelingly declares, that he would gladly endure any torture in the foot, to be relieved either from the distressing sensations which affect the internal parts in a chronic form; or, the alarming acute attack of which I have been treating. Dr. Cullen has distinguished these anomalous forms of complaint by the term misplaced gout; but I would rather define them to be disordered functions of internal organs in a gouty constitution, and modified therefore in their character. In the case which I have described at p. 524, the highly stimulant application used to the feet, although they acted strongly as rubefacients, did not give rise to any degree of gouty action. Also in the colic of the gouty patient, when I have used a similar treatment with a view to favour the production of gout, I have not succeeded in this object. But I find that when gout has been retrocedent from the extremities, and such treatment has been employed, it has almost with certainty returned to the extremities. It does so even spontaneously on many occasions, as soon as the internal disease subsides, although no stimulating applications have been used to the external part. I consider therefore that the results in question are to be received as strong presumptive proofs of the nature of the internal disease.

One gentleman informs me that at a time when he was entirely free from every sensation of gout, he walked about on a wet day, and upon his return home was seized in a moment with a pain at the pit of the stomach, so excruciating, that he could suppose the stomach itself to have been tied up in a knot with a strong cord. He instantly drank brandy, and in his alarm took it so freely that he became intoxicated. Yet this proved the cure.

Another gentleman, when free from gout, produced a similar attack from incautiously eating some Orlean's



plums. He described his pain as if some one were drawing a sword across the stomach.—Such are the intense sensations of gouty persons. He was restored by the use of cordials and aperients.

I advise patients of this description in the first place to pursue an exact regimen; secondly, to avoid wet and cold with extreme circumspection; and, lastly, to provide themselves with an anti-spasmodic medicine as a *vadē mecum*. This may consist of a combination of ammon. carbon. conf. aromat. mist. camphor, sulph. æther, tinctura opii. A full dose of calomel, and a purgative made moderately aromatic, should follow the use of the anti-spasmodic. The application of heat to the abdomen is an important auxiliary to the other treatment, and may be made conveniently by means of a large bladder filled with hot water. I am now describing the action which belongs to spasm, and not to inflammation. The pediluvium with mustard and salt should be added to the list of general remedies; but I must again observe, that the radical treatment consists in the free use of purgative medicine; the soothing use of opium being conjoined, as I have already pointed out; and the remedies used according to the continuance of the case, and as the judgment of the practitioner will direct.

IN bringing the present Treatise to a conclusion, I deem it necessary, *briefly*, to make a more particular reference than I have yet done, to the principal constitutional diseases, to which, gout and the habits of the gouty may be considered as pre-disposing.

A few persons, as I have before stated, pass through a long life, suffering periodical visitations of the gout, and never incurring any other disease; until at length



the natural infirmities of years, aggravated by the effects of gout, emaciate and wear out the frame.

I knew well a gentleman, advanced to a great age, who, during forty years of his life, was not on any one occasion absent from his office of business, which was situated five miles distant from his residence and daily required his attention, upon any other account than the gout, to which he was subject at regular periods.

Another gentleman, now aged 86, states that he has not been subject to any other disorder than the gout.

I have known two or three gouty persons who have lived beyond ninety.

These examples of the gouty life protracted to an extreme old age, are comparatively rare; and may be said to appear only in the chosen few, who, in strength of constitution, were formed for longevity.

Those *who neglect the proper management of gout*, are more liable to die prematurely; and others, who reach a considerable age, having left the disease to its own course, are afflicted with perpetual discomfort and frequent misery.

Dr. Heberden forcibly remarks, "It can hardly be reckoned one of the disadvantages of the gout, that after destroying all the comforts of living, by this weight of misery, or by bringing on a palsy or apoplexy, it immaturity extinguishes the powers of life."

Dr. Sutton, in commenting upon the prevalent notion that gout rather tends to lengthen than abridge the duration of life, observes, that those, whose pecuniary interests are concerned in this particular, make a different estimate, and by which, "those subject to the gout are placed under the predicament of paying a greater premium for the insurance of life, than those who have never suffered from the disease."

The question of the influence of gout upon longevity, is one of great importance. My quotation from such authority as Dr. Heberden may perhaps alarm the gouty reader, and therefore I am desirous to offer my own qualification of such a statement, more at length. I must not hesitate to say that every person, on the first occurrence of gout, should receive its visit as an admonition to adopt a regular mode of life, and to pay the most strict attention to the regulation of the digestive functions. If duly observing such care, he will almost with certainty render the gout a slight and unfrequent disease.

It appears to me that the increase of premium demanded by the insurance offices for an individual who has once been affected with gout, is a fine beyond what is equitable. It very commonly happens that the gouty patient is not subject to any other disease than gout, and with proper treatment it cannot be pronounced a dangerous disease. I will go further, by observing that gouty persons are for the most part more favourably organised for the possession of health than others ; and if they consent to use the timely care which I have just now stated, I should have more confidence in the integrity of their constitution to give the prospect of longevity, than in the constitutions of other persons in general.

This observation I mean to apply to those who have not yet suffered much from the gout ; and cannot fairly be extended to the unfortunate martyrs to the disease, whose health and constitution have been already broken down.

The occasional occurrence of *apoplexy* amongst those gouty persons who are altogether inattentive to their habits of living, is a familiar fact. It is also a truth which deserves to be stated, that some gouty persons, advancing in years, lose the disposition to their for-



mer attacks of gout, apparently in the same proportion that they acquire a tendency to apoplexy. The individuals whom I have seen to exemplify this statement, have possessed more of the sanguineous than the mixed temperament, with great plethora of vessels; and have been robust and corpulent. Their habits growing more and more sedentary, *and their indulgences in living not being diminished*, the liver becomes obstructed; the action of the bowels and of the kidneys is not adequate to the excess of ingesta, and of the chyle that is assimilated; whence, a redundancy of blood in the system, and an interruption of the healthy balance of circulation, follow as the consequence. It appears to me as a further reason why the gout does not occur as formerly, that these elderly persons are seldom exposed to the most active of all the exciting causes, wet and cold. In the temperament and structure just described, the apoplexy which occurs, is, for the most part, and especially unless prompt assistance be rendered, immediately fatal in its event. In the mixed temperament with less fulness of habit, the attack is probably more commonly followed by paralysis; or, sometimes, by the agreeable consequences of perfectly successful treatment.

Obstruction of the liver; jaundice; cholera morbus; dyspepsia; hæmorrhoids; constitute the chief assemblage of the morbid states of the digestive organs, to which gouty persons, who are not careful in their habits, have the strongest tendency.

*Asthma* occasionally supervenes on gout; and the invalid has only short intervals from one or the other disease; a respite which he owes principally to the less variable weather of the summer season. It sometimes happens that an asthma, which has chiefly been depend-



ing on a faulty state of the chylopoetic viscera, becomes suspended for a long time, or, in more favourable cases, is even removed by the occurrence of gout taking place as a new disease in the constitution.

*Hydrothorax* is an occasional result of that complicated state of visceral disease to which the gouty constitution predisposes. A few, whose lungs are unhealthy, and whose excesses in living are great, die before middle life with all the symptoms of consumption.

*Ascites*, arising out of the errors of diseased liver or spleen, or of both viscera in conjunction, sometimes happens, as a remote sequel to gout.

*Gravel* occasionally takes place in gouty persons, but for the most part it is the disease of their early life before the invasion of gout; and *stone in the bladder*, although (as in Sydenham) it now and then unites its tortures with the gout, is, according to my observation, as I have stated at p. 43, of rare occurrence.

*Erysipelas* attacks some gouty persons; and sometimes seems to represent, or come in the stead of, the expected fit. It has appeared to me that gouty women are more disposed than gouty men to this additional disease.

*Erythema* and *Urticaria* may be mentioned among the incidental complaints of gouty persons. I have seen an instance of each of these complaints, shortly preceding the paroxysm; and, doubtless, arising from a faulty state of the stomach and bowels.

The occasional union of *Rheumatism* with gout, has already engaged our attention.

*Cramps*, although a symptom only of a morbid condition of the nervous system, and usually depending on an unhealthy state of the chylopoetic viscera, is with some gouty persons so urgent a suffering, as to form the leading feature of disease which most engages their attention. Some experience this troublesome symptom only in cold and damp weather.

The most important of the diseases, which I have here enumerated, must receive their pathological explanation from the two-fold cause of an over-loaded circulation with partial debility of vessels. Accordingly, as one viscus is more weak than another, partly from original structure, and partly from the frequent interruption of its healthy functions, so will be found the consequent seat and nature of the supervening disease. Whether it happen, that some one particular organ acquires, from obstruction and weakness, a state of congestion which renders it incapable of performing its former share in the general circulation; or whether, by the peculiar action of stimuli, an accidental increased action of vessels takes place in a particular part; the healthy balance of circulation is interrupted, and, from either cause, similar effects may be produced. Thus, apoplexy in a plethoric person, may arise out of the effects of a continued obstruction of the circulation of the liver; or it may be produced in a more sudden manner by the excessive stimulus of intoxicating liquors acting on the brain. When the picture which is here drawn (and it is one that is rather softened, than too closely copied from life), added to that of the sufferings which gout directly in-

flicts, is well considered, it seems surprising that the idea which many gouty persons fondly entertain, that a paroxysm is an indication of health and strength of constitution, rather than an actual disease, should ever have been cherished.

Let them, ere it be too late, change their destructive habits of indulgence; and instead of reposing a mistaken confidence in the palliative powers of the *eau medicinale*, and other nostrums; or even trusting to the supposed curative influence of a fit of gout; let them adopt, with virtuous resolution, a true *prophylactic regimen*.

In connexion with the present general view of my subject, I shall offer a slight discussion on the practical principles which are applicable to the *acute* diseases under which gouty persons, in common with others, may labour; and lastly, the treatment of apoplexy incidentally occurring to the gouty, when wholly free from gout, is to be considered.

The prejudice which has for many years existed against the propriety and even safety of general bleeding in gouty cases, whatever the incidental disease might be, although for the last very few years it has certainly been on the decline, appears to me to be yet in considerable force; operating on the minds of the public at large, as well as influencing in some degree the practice of the medical profession.

Dr. Cullen, however, who does not make the least mention of blood-letting as a remedy in any of the forms of retrocedent gout which he has described, allows this treatment in the phlegmasiæ, which, occurring in a gouty person, he calls misplaced gout; and thus expresses himself: "In this case, the disease is to be treated by



blood-letting, and by such other remedies as would be proper in an idiopathic inflammation of the same parts.”\*

Dr. Heberden† speaks of general bleeding with caution and some distrust, in the accidental diseases of a gouty person, lest the gout should be at hand; but he grants this exception, “that it will be far more hazardous to neglect bleeding in an inflammatory distemper, than to take away blood in the gout.”

In the fourth volume of the Medical Transactions of the College of Physicians, Dr. Haygarth states an interesting case, which he considered to be *carditis arthritica*, and relates that in consultation he proposed this question: “Is it necessary and safe to take some blood from a vein, even though the gout be the cause of this inflammation? If there were no such suspicion, the violence of the disorder would require large and repeated venesections.”

I offer this quotation, as a strong proof of the sentiment which prevails against the use of the lancet in the inflammatory diseases of the gouty.

The recommendation expressed by Dr. Cullen, and just now quoted, may be held as the true axiom of practice; and the facts indeed in support of it appear to my observation so familiar and evident, that many details upon the subject need not be added.

I visited an elderly gouty gentleman suffering from an inflammation of the kidneys. Bleeding from the arm to a free extent was one of the means of treatment, and was attended with the best success.

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\* Par. 583.

† Commentaries, p. 45.

A gouty man, of plethoric habit and sanguineous temperament, was seized with inflammation of the lungs, which had been induced by exposure to wet and cold, when on horseback. Repeated venesection, in concurrence with the usual general treatment, was employed with the same favourable results as would happen in a similar disease of one not gouty.

A gentleman, more than seventy years of age, who had been afflicted with gout through the greater part of his life, was labouring under severe cough, much pain of the head, excess of vascular action, and evident plethora. No symptoms of gout were even threatening. He had an insurmountable objection to the remedy of bleeding. In a short time hæmorrhage from the nose took place, which was almost alarmingly profuse; but the system became effectually relieved, though with too much expense of the powers of the constitution.

In this case, a definite quantity of blood abstracted at a timely period by art, and in co-operation with the use of medicine, might have proved equally successful in its effects, and would have been much less debilitating than the spontaneous hæmorrhagic action of the vessels. Nature seldom or never errs in her intentions; but the measure of her performance does not seem always just. So in spontaneous hæmorrhage. The process in its beginning may have been necessary, and very salutary; but its uncontrolled continuance might be destructive.

When I considered the subject of general bleeding under the head of remedies in the gouty paroxysm, I stated, that if the inflammatory diathesis were strong and permanent (a full strong pulse with a continued hot skin),



and no contra-indication presenting, the remedy of venesection should not be delayed; but otherwise a sufficient dependance might be placed on the derivation produced from the circulation by purgatives and diuretics.

When a local inflammation of any kind is set up in an external part, the use of general bleeding is more optional, than where an inflammatory action of the heart and arteries prevails alone; or, than in the case of an internal inflammation; because we know that the determination of blood to the inflamed external part, is to a certain extent a relief to the general circulation, and does not endanger the destruction of the whole machine; but if the inflammatory diathesis of the system be violent; or inflammation exist in an internal organ; venesection should be practised without restraint from those fears which belong only to false pathology. Whether the patient be gouty or not, the same principles of treatment must be exercised; or life itself may fall the sacrifice.

The importance of accommodating our practice to existing circumstances, and to real indications, is still more manifest in the case of a constitutional tendency to apoplexy occurring in the gouty, unconnected with the paroxysm. This subject, then, is now to be discussed.

A gouty person should take early notice of sudden increase of corpulency, whether it be general, or more partially confined to the abdomen; and in proportion as his structure favours plethora and congestion in the vessels of the brain, should this attention be paid. Also a consequent regulation of regimen, both as to diet and exercise, and the hours of rest, should be adopted. A daily action of the bowels is a point of attention of the greatest magnitude; and a due secretion of the kidneys is also never to be overlooked. I shall not repeat the



arguments which I have already advanced in this volume, upon the high importance of this function to the health of the system.

Among other symptoms of serious warning, may be mentioned, pain of the head with a sense of fulness, confused vision and giddiness; excessive drowsiness in the day, and dulness of the faculties, with severe hypochondriasm; and in the night, profound sleep with deep and slow inspirations in the breathing, frightful dreams, and night-mare. The dyspepsia, which is attendant upon these symptoms, should be treated by purgatives and correctives; and every species of tonic should be delayed till a correct balance of the circulation, and a healthy condition of the several secretions are restored.

In proportion as the signs of congestion in the vessels of the head are manifested under the general circumstances which have been stated, the propriety of cupping near the head will be pointed out; or, if an inflammatory diathesis of the system be also present, general bleeding will deserve the preference; but in cases of this description, *of the fullest amount of symptoms*, undoubtedly both local and general abstraction of blood will be required.

I shall relate a few examples, which have come immediately under my own observations, illustrative of these different positions:

A gentleman, aged 45, of plethoric habit and sanguineo-nervous temperament, who had suffered repeatedly from gout during seven years; at the accustomed season of the year, and at the usual time of the invasion of the fit, was awoke about two in the morning with dreadful night-mare, and all the horrors of suffocation; and these symptoms recurred two or three times. He was cured by the free employment of purgatives and

diuretics ; by restraint of diet, and by general regimen : and no attack of gout occurred.

A tall robust man, aged 64, of full habit and sanguineous temperament, who had been gouty since the age of 30, but for a year past had been free from attack, had become very plethoric from indulgence. After dinner, when sitting in his chair, he suddenly felt an extraordinary sense of coldness and numbness, from the head downward on one side, and had not the power to rise. He was immediately cupped to a free extent ; and the bowels being also sufficiently acted upon, every unpleasant symptom vanished in a few hours.

A gouty man, aged 71, robust, corpulent, and of the mixed temperament, free from gout for three or four years past, was lately seized, under great indulgences in living, with a slight apoplectic fit, which was followed by a considerable degree of hemiplegia. The faculties of the mind were much weakened. In this case, there was an evident obstruction of the liver, and the several secretions were extremely vitiated. The bowels were obstinately torpid. So much inflammatory diathesis was present, that general bleeding was at first employed. The excitement and correction of the functions of the liver, alimentary canal, and kidneys, constituted the regular treatment ; but in addition to these means, although the diet was abstemious, occasional cupping was required. The patient recovered, and no paralysis remained.

A corpulent man, aged 53, plethoric, and rather of the sanguineous than the mixed temperament, had been subject to gout several years, and had suffered a severe paroxysm about two months since. It had been left entirely to its own course, no treatment having been adopted. He had never intermitted his full habits of



living. After having complained, during the day, of much pain in the head; and a very slight distortion appearing in the muscles of the face (yet, not seeking medical advice), as he was stooping to undress himself in preparing for bed, he fell down in a fit, and expired.

The last case to which I shall refer, was a seizure of apoplexy in a gentleman between sixty and seventy years of age. For many years he had been a severe martyr to gout; but latterly it occurred only in the chronic form. Under the united influence of a diet too full with relation to other circumstances, of a torpid state of bowels, and of habits entirely sedentary, this attack of apoplexy suddenly took place, and with a violence which threatened to be instantly fatal. Blood was copiously taken from a large orifice; and the usual general treatment was pursued with perfect success.

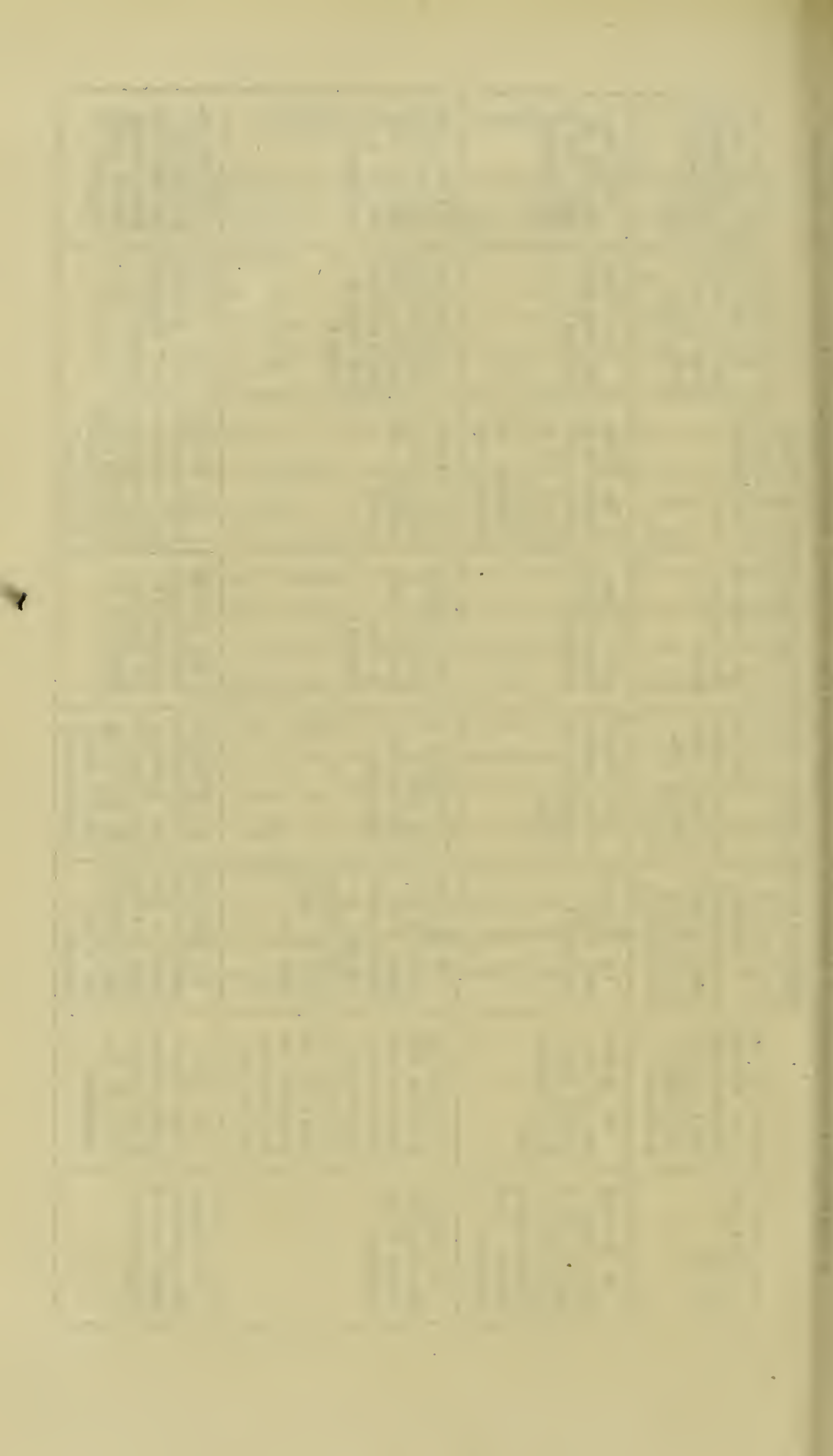
In these cases, the prognostic of permanent recovery is favourable, in proportion as paralytic symptoms disappear; as tranquillity and comfortable feelings return; as the sleep is less profound and more refreshing; as the faculties become clear; and the pulse recovers its regularity. So long as the pulse remains variable and intermitting, we may be assured that the functions of the brain are yet unsettled. Our judgment is further governed by the state of the secretions, and by the obedient action of the bowels. If assistance be fortunately at hand, and blood be freely drawn, while no rupture of vessel has yet taken place, success is very probable. The half-erect posture while in bed, instead of one that is quite recumbent, should be observed; and the free application of an evaporating lotion to the head forms a valuable auxiliary to the general means of treatment. A cool state of the apartment is an additional point of attention of much importance.



A prophylactic regimen for the remainder of life, and a strict regulation of the bowels, must be insisted upon as indispensable to justify the expectation of future safety. The use of a seton or issue at the neck, is in many instances very important. Tight clothing should be avoided, and especially a tight neckcloth. Such persons as are corpulent and plethoric, cannot too much observe a rule to avoid stooping; and they should be careful not to turn the head suddenly, without turning the body at the same time. The washing of the head every morning with cold water, by means of a coarse towel, is a practice of very great utility; and it may be repeated at any time, with equal advantage, when the head is painful, in these cases of local congestion in the vessels. Hot rooms must be shunned, as being highly injurious; and calmness of spirits, and serenity of temper, are comprised amongst the most important sources of security. By the united care of mind and body, according to the rules of the physician, any threatening of apoplexy may be turned into a lesson of safety: but those who relapse into error, must experience those melancholy consequences, which are too well known to require a further description.

A TABLE of the *Analytical* Method of investigating a Case of Gout, and the general History of the Disease, adopted by the Author in forming the present Treatise.

1. The age; sex, &c.	2. General structure; bulk; skin; complexion; family resemblance?	3. Habit; temperament; general points of constitution; idiosyncrasy?	4. Place of abode; climate; to what other diseases subject?	5. Station of life; employment?	6. Habits of living?	7. Gout in family, and in what degree of relationship?	8. At what age first attacked, and in what part?
9. In what parts subsequently, and in what order? Different parts together, or in succession?	10. At what part of the twenty-four hours in general?	11. Time of year, and periodical?	12. General causes, predisposing and exciting?	13. What the premonitory symptoms?	14. What relation has the violence of the attack to the particular predisposing and exciting cause?	15. Which the most painful part?	16. Most pain day or night, and at what periods?
17. Local sensations in the height of the paroxysm.	18. Local appearances and characters; temperature of the inflamed part contrasted with other parts. Description as the inflammation goes off?	19. General symptoms, as to pulse, skin, tongue, action and state of bowels, kidneys, kind of secretions, &c.	20. State of the mind? what nervous symptoms?	21. Irritable urethra? cramps; and in what muscles?	22. What the usual treatment; and with what results?	23. Gout ever retrocedent; to and from what part; and what the exciting cause?	24. What the longest and shortest duration of a paroxysm?
25. Longest and shortest intervals between the paroxysms?	26. What change of organization produced in the parts affected in the paroxysm?	27. Does the gout increase or lessen in progress, as to the severity or duration of the paroxysm?	28. What tendency has a violent paroxysm been found to have in prolonging the subsequent interval?	29. On what disease has gout supervened? and the contrary?	30. Has the patient considered his constitution benefited or injured by gout; and how does this fact appear?	31. To what other diseases has gout pre-disposed?	32. Particular practical opinions of various authors noticed and examined.





## APPENDIX.

*Abstract of a Series of Experiments made upon the Dog with several Gout Nostrums of the present day, and the different Preparations of Colchicum; with a View to demonstrate the Agency of these Substances on the Animal Œconomy; and to furnish some useful Information, in reference to the Employment of Colchicum as a Medicine.*

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SOME of my Readers will probably condemn these Experiments upon Animals, as not creditable to humanity; but I beg it may be considered, that this investigation was undertaken solely for the purpose of obtaining instruction on some important questions relating to practical medicine.

It may probably be asked, are these experiments really deserving confidence when their professed object is to compare the effects of medicines upon man and the dog, which are in their œconomy so differently constituted? I answer, that in the structure and functions of the stomach and alimentary canal, there is a sufficient general similarity for the purpose of these experiments. I offer them only in illustration of the results which I have found on the human subject; and as confirming me in the propriety of choosing the mildest preparation, and rejecting the strongest preparations of colchicum. They certainly

authorise some positive conclusions as to the properties and strength of the different agents of which I have treated, being fairly comparative; they set forth their mode of action upon the animal system; and shew the nature of the symptoms by which death is produced, when the medicines have been administered in the fatal dose.

In the last edition of this Treatise, I related the experiments in detail, of which I shall now state only a brief abstract. This abridgment will be more agreeable to the general reader; and if any one of the medical profession should desire to be in possession of the original narrative, I shall be happy to furnish him with a copy on receiving an application for that purpose.

I found the pulse of the dog in health, to vary from 120 to 180 in the minute; and that if the animal became at all alarmed, the pulse would not only become very frequent, but in several instances, intermittent. As far as I was able to ascertain, the average number of inspirations in the healthy dog, may be stated at 36 in the minute.

EXPERIMENT 1.—One hundred and sixty drops, measuring 135 minims, of *Eau Medicinale*, were injected into the jugular vein of a full-sized very strong dog, at a quarter before one, *p. m.* He immediately ran about, apparently not affected. He soon became languid, and looked sleepy, and the pulse was intermittent. The stomach and intestinal canal became extremely irritated. He died after an interval of twenty-seven hours

On the following morning an examination was made. The stomach exhibited slight appearances of incipient mortification; the duodenum and jejunum were highly inflamed; the ilium, colon, and cœcum, less; and a small spot of ulceration was seen at the commencement of the

rectum. Throughout the whole surface of the canal, marks of inflammation appeared.

The symptoms which quickly followed the introduction of the eau medicinale into the circulation, shew its powerful influence on the nervous system, and would appear sufficient to warrant the conclusion, that, by this mode of acting, it produced death; but the extensive morbid changes found by dissection in the alimentary canal, must lead us to consider, that the disturbance of the nervous system, as well as of the circulation, would, in a great measure, arise from the diseased action taking place so rapidly in the stomach and intestines; and therefore the fatal exhaustion produced may in part only be referred to the specific and primary agency of the medicine upon the nerves.

The action of this medicine, in common with other vegetable medicines through the medium of the circulating blood, has already been demonstrated by Sir Everard Home, in his experiments related in the *Philosophical Transactions* for 1816; and the experiments of earlier physiologists to the same effect, are related in the *Edin. Med. and Chir. Journal* for April 1817.

EXP. 2.—*Wilson's Tincture*.—One hundred and sixty drops of this medicine were injected into the jugular vein of a mongrel dog, the size of a large terrier. The animal died in seven hours and a half. He lost about six ounces of blood in the operation, which undoubtedly hastened death. The symptoms which were produced, were not very different in character from the former, and the appearances on dissection bore a near resemblance, although they were less in extent.

EXP. 3.—*Reynolds' Specific*.—One hundred and



eighty drops of this tincture, measuring two drachms, were injected into the jugular veins of a young mongrel dog. This increased quantity was employed in correspondence with the direction of administering a larger dose of it, than of the other medicines, to the human subject. A very similar result was produced as in the previous experiment. In each instance the action of the liver was excited, but the mucous membrane of the stomach and intestinal canal was the texture most affected. This animal survived the experiment only seven hours and a half.

EXP. 4.—*Hellebore and Laudanum*.—One hundred and sixty drops of this mixture, in the proportions recommended by Mr. Moore\*, were injected into the jugular vein of a large dog. He became instantly motionless and insensible, and was to all appearance dead. In six minutes he revived, but the respiration was very quick and difficult. For several hours various severe symptoms occurred; but on the following morning the animal ran about, and had a good appetite.

The very opposite manner in which this compound medicine acted, sufficiently proves its distinct nature from the eau medicinale. The instantaneous and chief influence of this preparation on the nervous system, and the urgency of the symptoms during two hours, with the subsequent speedy recovery of the animal, present a strong contrast to the result of the former experiments, and strengthen the supposition, that death from the other medicines is chiefly to be attributed to the inflammation produced in the alimentary canal.

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\* See page 204.

EXP. 5.—*Elaterium and Laudanum*.—Two grains of elaterium and sixty drops of laudanum (40 minims) mixed with a drachm of water, were injected into the jugular vein of a middle-sized terrier. He instantly lost all power of motion, and was quite insensible and lethargic. Urgent symptoms of irritation followed, and the animal died in about twelve hours.

Upon examination, strong marks of inflammation were found in the lungs, liver, stomach, and intestinal canal. The immediate action of this compound is alone sufficient to prove its difference from the eau medicinale. The first symptoms were similar to those in Exp. 4, affecting the nervous system powerfully; but the progress was that of active inflammation, the effects of which appeared so manifest on dissection,

EXP. 6.—*Sir Everard Home's Vinous Infusion of Colchicum*.—One hundred and sixty drops, measuring two drachms, of this preparation, were injected into the jugular vein of a strong dog. This medicine produced very active effects in a short time. The dog survived only five hours and a half. The nervous system was much less affected than by the eau medicinale; but the appearances found on dissection were very similar from the two medicines. The lungs were affected in the present instance; which did not happen from the eau medicinale.

EXP. 7.—*Tincture of Colchicum*.—One hundred and sixty drops of this tincture were injected into the jugular vein of a mixed terrier of middle size. Very severe symptoms quickly ensued, and the animal died in nine hours. Upon examination, the heart presented the

appearance of extreme inflammation, looking even black and gangrenous.

In this experiment the tincture was made from the dried roots, these being used in the proportion of four ounces to a pint of proof spirit. This is the most active preparation of colchicum which can be made, and is, in my opinion, a very unfit medicine. I have known it to operate as a violent drastic, when added to a simple purgative. In this experiment the effects produced on the heart were quite remarkable, and appear to have been the cause of death.

EXP. 8.—*Expressed Juice of the fresh Roots of Colchicum.*—One hundred and twenty drops were injected into the jugular vein of a young terrier. Severe symptoms were quickly produced, and the animal died in eight hours and a half. The strongest marks of inflammation were found in the stomach and intestines. The effects of pure colchicum are here distinctly shewn; and the blended influence of the medicine upon the nervous system and the alimentary canal, was strongly demonstrated.

EXP. 9.—*Acetum Colchici.*—Three fluid drachms of this preparation, neutralized by carbonate of ammonia, were injected into the jugular vein of a terrier dog of middle size. In three quarters of an hour he seemed languid, and trembled a good deal, but was capable of running about. In three hours he exhibited great lassitude; the pulse was 108, and irregular. In five hours and a quarter, on our trying to ascertain his pulse and other symptoms, he started off, as if quite well. In another hour, he was seemingly free from pain. Soon



after, the eyes had a lively appearance. In ten hours he seemed tolerably well.

On the following morning, at eight o'clock, he appeared quite recovered; looked lively; and was sitting up. There was no disposition, however, to move; he looked frightened. At six in the evening he was found in the same state. He had throughout the day assumed a sullenness of appearance; had not moved from the spot where he was left last night; refused both meat and drink; but had still a lively eye, and did not seem so much inconvenienced by the medicine, as alarmed by the operation.

On the following day he had all the character which appeared yesterday. In the course of this day he passed numerous alvine evacuations, and also urine very freely. He gradually recovered.

The comparative mildness of this preparation is rendered very evident by this experiment: the nervous system was slightly affected; and the intestinal canal and kidneys were stimulated; but the mucous membrane of the intestines did not appear to have suffered any degree of inflammation.

## EXPERIMENTS BY THE MOUTH.

EXP. 10.—*Eau Medicinale, with the Sediment which it forms, shaken up.*—Eighty drops, by measure 60 minims, were given to a large strong terrier. Severe symptoms were quickly produced, and the animal died in twenty-eight hours and a half. The nervous system was strongly affected, and the stomach and intestines were found highly inflamed.

EXP. 11.—*Expressed Juice of Colchicum, followed by Eau Medicinale, clear and turbid.*—Two fluid drachms of the juice were given to a strong dog of the terrier kind. He was rendered extremely ill for many days, but quite recovered at the end of a week.

Sixty minims of the eau medicinale, filtered so as to be quite transparent, were now administered. The animal was scarcely disturbed by this dose, and on the next morning appeared quite well. A further dose of two drachms was given. By this dose he was rendered ill, and much blood was passed from the bowels; but in a few days he quite recovered.

Next, two fluid drachms of eau medicinale with the sediment shaken up, were given. Severe symptoms were very soon produced. Much blood was passed from the bowels, and the animal also vomited. He died in nine hours. The stomach was found in a state of mortification; and the whole of the intestinal canal was much inflamed.

By the foregoing experiments, the greater activity of medicine on the system, when introduced directly into the circulation than when administered by the mouth, is clearly shewn; more than four times the quantity of expressed juice being used than in the experiment by injection; and the animal, although rendered very ill, recovered in a short time.

In the first edition of this Treatise, I noticed, at p. 164, “that in an old bottle of eau medicinale, the sediment which adhered tenaciously to the bottom, was considerable;” and I suggested, that this might serve to explain, in some measure, the very great difference in activity of the medicine at different times. Sir Everard Home has since noticed this circumstance, and verified the opinion by the comparative use of the medicine, with

and without the sediment, in his own case. In the present experiment, the dog recovered in a short time from the large quantity of three drachms of clear eau medicinale given in two doses.

The animal was so completely recovered at the end of five days, from the last dose, that he was made the subject of a comparative experiment with the eau medicinale, having its sediment shaken up. The immediate symptoms were very severe; and from the same quantity as before employed (three drachms in two doses), death took place in nine hours. Very similar appearances of inflammation were found in the alimentary canal as in the experiment by injection.

EXP. 12.—*Eau Medicinale in the transparent state, followed by the Tincture of Colchicum.*—Sixty minims of eau medicinale, filtered and quite transparent, were given to a strong terrier dog. He was rendered very ill, being affected with vomiting and a discharge of blood from the bowels, but he recovered in the course of twenty-four hours.

On the second day, six drachms of the tincture of colchicum of the shops (prepared in the proportion of four ounces of the dried roots to a pint of proof spirit) were given to the same dog. The most severe symptoms quickly ensued, and the animal died in sixteen hours.

It appeared desirable to repeat the experiment with the clear eau medicinale, upon a fresh dog. The symptoms produced, by a dose of 60 minims, were more urgent than I should have expected; and the effect on the mucous membrane of the intestines was very considerable; but the animal speedily recovered. The stimulating properties of the tincture of colchicum are strongly exemplified in the appearances, on dissection, of violent inflam-



mation throughout the alimentary canal, even from the œsophagus; but the heart was not in any degree inflamed; a result which was produced by this medicine in the experiment by injection.

EXP. 13.—*Wilson's Tincture*.—Two fluid drachms were given to a common-sized terrier. By this dose he was rendered ill, being sick, and much affected in the nervous system, but he recovered by the following morning. A second dose of four fluid drachms was now administered, which proved fatal in less than twenty-four hours. The stomach and intestines were found highly inflamed.

The effects produced in this experiment shew this tincture to be a very active medicine, although less so than the eau medicinale. Of the latter medicine, three drachms (Exp. 10), proved destructive in twenty-four hours; whereas, of Wilson's tincture, six drachms were given, and we may reckon that death did not take place until at least forty hours had elapsed. By the second dose of the eau medicinale, the pulse was rendered slower; while the opposite effect was produced by the second dose of Wilson's tincture.

The appearances found on dissection were not in any material degree different.

EXP. 14.—*Reynolds' Specific*.—Four fluid drachms were given to a strong terrier of the middle size. He was rendered very ill, was sick, and passed blood from the bowels, but was considerably recovered on the next day. A second dose of two drachms was administered, which produced the same symptoms as before. After another interval of twenty four hours, half a bottle more was given, which disturbed the stomach and bowels as

before, but the dog was recovering. In two days after, a fourth dose containing five drachms was given; and from the effects of this additional quantity the animal died in seven hours.

By this medicine, the first action upon the pulse was that of rendering it quicker; and the same effect was produced by the different preparations of colchicum, and by Wilson's tincture; but in each instance the pulse appears to have been at first rendered slower by the action of the eau medicinale. This tincture affected the mucous membrane of the intestines very severely. It is an active preparation, but more diluted in its menstruum than the other quack medicines. Twelve drachms were administered in four doses; and the animal survived the experiment four days and a half. The appearances on dissection very much corresponded with those produced from Exp. 3.

Exp. 15.—*Vinous Tinctures of Hellebore and Opium.*—Sixty minims of this mixture in the proportions before mentioned, were given to a strong setter dog. For a few hours no change appeared in the animal. Then the pulse became intermittent, and reduced from 196 to 80. On the next morning, at ten o'clock, one hundred and sixty drops were given. He immediately discharged from his mouth an abundance of frothy saliva.—Half past 2 o'clock: he had an appetite; the pulse was then 76, intermitting every 3 beats, and very hard.—Six o'clock: the pulse was 108, and the dog appeared lively.—Ten o'clock: the pulse was 106.

*Monday.*—He looked quite well.—Eleven o'clock: half an ounce more was given to him; the pulse was 120, and intermitting after every 5 beats; the same appearances followed this dose as the last; if at all different, they were



less remarkable, and he ate some food a few minutes after.—One o'clock: his pulse was 90, very irregular, and intermitting; in other respects he looked well, and at half-past two he made a hearty meal.—Five o'clock: he appeared dull; the pulse was 80, softer and still intermitting.—Eleven o'clock: the pulse was 79, vibrating and intermittent.

*Tuesday morning*, eleven o'clock: his pulse was 104, and very irregular, but the animal appeared quite recovered.—Twelve o'clock: he took six drachms of the tincture of hellebore; its action upon the salivary glands was instantaneous and profuse, the animal throwing out large quantities of frothy viscid saliva in all directions.—Two o'clock: his pulse was 76, irregular and intermittent. This dog appeared better towards evening, but having made his escape at dusk, the result of the experiment could not be ascertained.

As from the *eau medicinale*, the pulse was rendered slower from this compound preparation; but the different result of the experiment, as in that by injection, completely negatives the opinion of Mr. Moore, of the identity of this medicine and the *eau medicinale*. It seems remarkable that the animal should bear such large doses of hellebore with so little comparative injury.

EXP. 16.—*Tincture of Digitalis, followed by Laudanum and Elaterium*.—At half past, 1 p. m. 40 minims of tincture of digitalis were given to a terrier dog of middling size; there was immediately a copious foaming at the mouth.—Half past 2 o'clock: a great flow of saliva; he was staggering and looked very dull; the pulse was 125, and irregular.—Four o'clock: he was much better.—Six o'clock: looked stupid, and was extremely feeble; the pulse was 104, and very irregular.



*Monday.*—He appeared quite well. At 12 o'clock 40 minims of laudanum and 4 grains of elaterium were given to him.—One o'clock: the pulse was 228.—Half past two o'clock: had vomited some thick mucus mixed with bile, and there was reason to believe that the medicine was also discharged from the stomach; he ate freely of meat. Five o'clock: the pulse was 180.—Eleven o'clock: the pulse was 190; he had vomited a quantity of undigested food.

*Tuesday morning,* 11 o'clock: his pulse was 200, and regular; he appeared recovered.—One o'clock: five drachms of the tincture of digitalis were given to him: this instantly produced a flow of viscid frothy mucus, and he made many attempts to vomit.—Two o'clock: he had vomited some undigested food mixed with mucus, and which appeared coloured with the tincture; the pulse was 186, and irregular; there continued an abundant discharge of viscid mucus from the mouth.—Five o'clock: pulse 200; respiration quick and laboured; he had vomited more mucus tinged with blood; great lassitude.—Eight o'clock: the pulse was feeble and rapid, beating 210; the animal made continual attempts to vomit.—Eleven o'clock: the pulse was 200: there were incessant attempts to vomit; the respiration was very quick.

*Wednesday.*—Was much better; the pulse 160; towards evening he had an appetite for food, of which he ate freely; there was a constant dry cough, attended with an effort, as if endeavouring to bring something from the throat.

*Thursday.*—He appeared lively, and had a good appetite, but was much distressed with the cough before-mentioned, and his pulse in consequence could not be counted.

*Friday.*—He had in a great measure recovered his looks; the cough was better and the appetite natural; the pulse varied from 150 to 164.

*Saturday.*—He was lively and still better; the pulse was 168.

The chief intention of this experiment was in reference to the opinion which seems to have been conceived\*, that the eau medicinale is a composition of elaterium and laudanum; and further, to ascertain, by the administration of that active medicine the tincture of digitalis, how far the dog is susceptible to the influence of the powerful articles of the materia medica; enabling us in this way to reason more correctly in regard to the doses, and their effects, of the gout *specifics* on the dog. The inferences suggested by the results of this experiment appear to me sufficiently obvious.

EXP. 18.—*Acetic Preparation of Colchicum.*—A fluid ounce of this medicine, neutralized by pure magnesia, was given to a large mongrel dog. It produced no visible effect, but his pulse was rather accelerated; he ate and drank freely, and was in good spirits on the following morning.

A few days after, at two o'clock, this dog was made to swallow two fluid ounces of acet. colchici, evaporated down to half an ounce, mixed with magnesia. This, like the other dose, did not occasion any change in the appearance of the animal. His pulse did not undergo any alteration, and his strength was in no way apparently affected.

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\* See p. 210.

On the following morning it was found that he passed two or three copious discharges from the bowels; but these were quite free from blood; and his pulse was found to be the same as at the commencement of the experiment.

The extraordinary quantity of this preparation, amounting to three ounces in two doses, administered not only without fatal result, but even without serious symptoms being produced, is a striking proof of the modification effected in the properties of the colchicum by means of the acetic acid as a menstruum. It is worthy of observation, that, although a considerable purgative operation was produced, the mucous membrane of the intestines did not appear to have been unfavourably irritated. No blood was discharged.

EXP. 19.—Twenty grains of the residuum left by evaporation over a water bath, of the proof spirit tincture of colchicum (prepared with the dried roots in the proportion of four ounces to a pint) were inserted into the inside of the thigh of a small dog. Very severe symptoms were produced in two or three hours, and death took place in twelve. The parts about the wound in the thigh were black, almost approaching to mortification. Internally, the usual appearances of high inflammation were produced.

This experiment points out that the colchicum is very quickly absorbed into the circulation; and the rapid progress of the symptoms demonstrates the virulence of the medicine. This is further shewn by the local action of the extract.

EXP. 20.—*Sediment from Wine of Colchicum.*—At half past eleven *a. m.* ten grains of this sediment, pro-



cured from the vinous preparation of colchicum, which had been set by for use in the transparent state, were given to a large and very strong terrier. The pulse at the time of the experiment was 114 and intermittent. Two o'clock: no visible effect had been produced; the pulse continued slow, irregular, and intermittent. Three o'clock: the pulse was 94 and rather fuller. Five o'clock: no alteration. Seven o'clock: he appeared lively and as well as before. Ten o'clock: the pulse was 90, fuller, and more regular.

On the following day, ten grains more were given; but this quantity, like the former, had no remarkable effect.

Two days having elapsed, ten grains more of sediment were given him; his pulse at the time of the experiment was 108, and very irregular. Three hours after, he appeared quite well, was in good spirits, and running about the yard. Two days after, a further dose of ten grains of sediment was given; but even from this additional quantity no apparent change took place in the animal.

Sir Everard Home having found, as I have before stated, that the eau medicinale was a much more active medicine when used with its sediment, than if poured off clear, and considering the vinum colchici to be substantially the same medicine as the eau medicinale, he was induced to make trial of the sediment of the colchicum administered in a separate state. He relates, *Phil. Trans.* Part II. that "six grains of the deposit of the vinous infusion of colchicum were given to a dog in bread and milk; in three hours it produced vomiting and purging, which lasted twenty-four hours; during the latter part of that time there was blood in the stools, as well as in what was brought up from the stomach." The result of

this experiment led Sir Everard to recommend the use of the vinous infusion of colchicum in its transparent state, after having by degrees deposited its sediment. The latest observations of Sir Everard are contained in a letter to Mr. Brande, published in No. XI. of the Journal of Science and the Arts; and he states, that “the deposit which is separated from the infusion by keeping, when given by itself in the dose of a few grains, produced inflammation and ulceration on the coats of the stomach and intestines;” and that “the infusion removes the paroxysm of gout equally readily, whether given without the deposit as with it.” Being desirous to ascertain to what extent the deposit might be administered to the dog, I carefully collected, from genuine preparations, a large quantity of that sediment which the vinous infusion of colchicum very slowly deposits after its last filtration, and being put by for use in the transparent state. My surprise may be conceived, on finding that even forty grains\* were administered in four doses, without any appearance of inconvenient effects to the animal.

I am wholly at a loss to account for the very different result of my experiments; for I must necessarily conclude that the deposit of the vinous infusion of colchicum is an inert substance. It appears to me to consist chiefly of insoluble extractive matter. It cannot be dissolved either in wine or diluted spirit, even with the assistance of heat. On the contrary, the sediment of the eau medi-

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\* This sediment was freed from its moisture by being placed in the cavity of a piece of chalk-stone (no heat being used); and the dose expressed was of dry sediment. Hence it is readily seen that the quantity administered was very large. It was given in mixture with a little water.



cinale is perfectly soluble in its own liquor, by the application of heat. Hence a very striking difference is manifested in the nature of these two medicines.

EXP. 21.—*Clear vinous infusion of Colchicum.*—Eleven drachms were administered, in four doses, at considerable intervals, to a strong terrier dog.—The usual urgent symptoms were produced, and the animal died at the end of 88 hours.

EXP. 22.—*The same vinous preparation of Colchicum, with its deposit shaken up.*—The same quantity in divided doses, as in the preceding experiment, was given to a common-sized shepherd dog; not appearing quite so strong as the terrier. The usual symptoms were produced, but the animal survived a few hours longer than the other from the preceding experiment.

These results serve to shew that the clear infusion possessed as much of the active properties of the colchicum, as the turbid. The terrier dog was even the strongest in appearance. In this experiment the animal survived a few hours longer than in the preceding instance. Hence, according to each of my experiments, it follows, that the deposit of the vinous infusion of colchicum is an inert substance; and, consequently, that the clear infusion is as active a medicine as that which is turbid from the admixture with the sediment. It is worthy of observation, how much weaker a preparation this infusion is, than the eau medicinale, Wilson's tincture, and Reynolds' specific; which, in the ratio of their strength, may be ranked in the present order; but notwithstanding this fact, we see its destructive influence upon the stomach and alimentary canal of the dog, in doses very



far short of those of acetum colchici and magnesia administered with perfect impunity.

The medical reader must be struck with the circumstance of the large quantity of colchicum used in Sir Everard Home's preparation, equal weights of the fresh root and of the vinous liquor being used. It is not, however, to be concluded that the preparation is really stronger than the ordinary wine of the shops; for, as I have ascertained by experiment, the quantity of ingredient far exceeds the power of the menstruum.

The macerated roots left by this preparation; the roots left by the wine, according to the usual preparation by proof spirit; and by the acetic acid; were all treated in the following manner. An ounce was boiled in water and reduced by evaporation to the state of an extract. The produce from the respective preparations was administered to different dogs.

That obtained from Sir Everard Home's, proved fatal to the animal in twenty-four hours. The extract procured from the ordinary vinous infusion rendered the animal ill; but he recovered completely in about thirty-six hours.

So completely had the proof spirit, and the acetic acid, acted upon the root, that the extracts which were obtained as just stated, did not cause any disorder in the animal. I should observe, however, that in each preparation, except Sir Everard Home's, the preparation of roots employed was only an ounce to the pint. Yet in all the experiments, an ounce of the macerated roots was equally chosen.

I found, by evaporating equal quantities of Sir Everard's vinous infusion, and the wine of the shops, that from the latter, actually a larger quantity of residuum was procured. Hence it is quite clear that an unneces-

sary quantity of the root is employed in the above preparation, and that it is not really stronger, as might be presumed. I am persuaded, indeed, that the solvent power of the menstruum is much weakened in consequence of the loss of spirit, which takes place in the long digestion of the infusion, heat also being used. I do not find that the spirit is distilled off, as Sir Everard Home mentions : but certainly much of the alcohol of the wine must be carried off, by the long digestion in a warm temperature.

At p. 233, I have erroneously described the pure alcohol menstruum as dissolving most of the principles of the colchicum ; for in a subsequent Exp. with proof spirit, I found that 100 parts yielded six grains of extract, proving that it is by far the most active of all the menstrua which can be employed. I may here take occasion to mention, that one of the fluid preparations of colchicum which I employed proved almost wholly inert. I obtained it from a very respectable chemist. On examining the roots which had been used, I found that, instead of being firm and mealy, they were very porous and fibrous. Hence a lesson is afforded to the chemist, of the necessity of examining the condition of the roots before they are employed for medicinal purpose.

EXP. 23.—*Resin of Opium*.—I shall relate the details of my experiments with opium, in order to exemplify the great constitutional power of the dog to resist the agency of large doses of this narcotic. With this fact is also to be taken into consideration, the capability of the animal to take hellebore, elaterium, and digitalis, without fatal injury. The inference surely follows, that active doses of the strong preparations of colchicum should not in any case be administered to the human subject.



At twelve o'clock, a drachm of the mere resin of opium was given to a terrier dog, his pulse then being 168, and regular. At 20 minutes past one, he threw up a quantity of transparent thin mucus, and made a whining noise, appearing very uneasy; the pulse being 96, irregular and intermittent. In ten minutes more, there was a copious discharge of frothy saliva from the mouth, and the whining continued.—At half past two, he had several times thrown up more fluid of the above description.—At a quarter before three, he was found staggering, and seemed to have great difficulty in supporting himself; the pulse was 84, hard, irregular, and intermittent.—At half past four, he continued to throw up abundance of mucus; had not slept since he took the resin; the pulse was 114, and intermittent.—Half-past five: he looked dejected; the pulse was only 90; the pupil of the eye was much dilated; he was quiet, and seemed disposed to sleep. Slept till half-past seven; then awoke uneasy, moaning, and very restless; the pulse was 90; the inspirations were 18; and he looked very dull.

*Tuesday morning.*—At eleven o'clock, this dog appearing to be quite recovered, his pulse regular, and 144 in the minute, fifteen grains of Mr. Battley's sedative extract of opium were given to him. It had the effect on the salivary glands before described, as produced by the resin, and he made the same plaintive noise.—Two o'clock: he looked dull; the pulse was 84, irregular, and intermittent.—Three o'clock: the pulse was 84; he was lying down, and very dejected.—Half-past four: he looked stupid; the abdomen was remarkably tense; the pupils were much dilated; the animal appeared to suffer great inconvenience; the pulse was 72.—Six o'clock: the pulse was 72; the appearance of the dog was very dull. He shewed great debility, and made a continual



whining noise.—Eight o'clock: the pulse was 126; he was standing on his legs with much difficulty, and made much noise.—Half past nine: he was quiet, and appeared in much better spirits; the pulse was rather slower than before. He now stood with less difficulty.—Eleven o'clock: he was very restless and uneasy; the eyes were bright.

*Wednesday morning*—The dog seemed quite recovered, and ate with a good appetite; the pulse was 192.—Eight o'clock *p.m.* he continued to mend; had passed several dark-coloured discharges; the pulse was 192, and irregular.—Eleven o'clock: no alteration.

*Thursday morning*.—He appeared quite well; the pulse was 160.—At eleven o'clock, fifteen grains of crude opium were given; there was an immediate slight frothing of the mouth, which was not followed by any remarkable appearance in the animal; but he looked rather dull. At three o'clock, his pulse was 120; he had passed a dark bilious discharge. On the following day he was perfectly well.

*Saturday, Jan. 2, 1819.*—Gave him a drachm of crude opium at twelve o'clock, the pulse being 148. At half-past one o'clock, the pulse was 180, and the appearance of the animal was scarcely changed. At four o'clock, the pulse was considerably lowered, but not to be counted with accuracy, in consequence of frequent shiverings with which the animal was affected. He looked dull, frothed at the mouth a little, was almost incapable of standing, and was sensible.—Six o'clock: the pulse was much the same, and the same difficulty existed of ascertaining its number. He appeared very feeble, and uttered faint plaintive cries.—Ten o'clock: the pulse was only 66; he was extremely languid, and unable to move; the pupils were much dilated, and he

seemed not to sleep throughout the day; had refused food since he took the opium, but appeared sensible.

*Monday, eleven o'clock.*—The pulse was the same, and the general appearances of the animal corresponded with those of the preceding night. He walked with difficulty, dragging the hind extremities, which seemed nearly paralysed; the pupils were more dilated than before; and the animal looked more stupid.—Ten o'clock *p. m.* he gradually mended throughout the day, and, in some degree, recovered his strength; the pulse was 66. The dog was still without appetite.

*Monday morning.*—The pulse was 168; he looked better; and very shortly he recovered.

The sedative action of opium was much more remarkable than might be expected, and serves to shew that the anodyne properties of opium must be in some degree weakened by the separation of its resin, although its stimulating qualities are certainly lessened. The dose of sedative extract was in the proportion of a fourth to the resin; but it acted in a very similar manner and degree. The dose of 15 grains of crude opium had scarcely any effect, except that of rendering the pulse slower. One drachm produced powerful effects on the nervous system: but we see that from this large dose, in addition to what had been before administered, the animal shortly recovered; whereas, of the *eau medicinale*, Wilson's tincture, Reynolds' specific, and all the preparations of colchicum except the acetic, doses not more than equivalent, produced not only the most urgent symptoms, but proved fatal.

In regard to the probable nature of the *eau medicinale*, it appears to me rendered sufficiently evident that

it cannot possibly be a preparation from the bulbs of colchicum.

In addition to what I have mentioned of Wilson's tincture, at p. 233, I have to observe, that it appears, by its action on the dog, and from other circumstances, to be a concentrated preparation of colchicum. It resembles a mixture of the extract obtained by evaporation, with diluted spirit, and does not become transparent on being heated.

Reynolds' tincture appears, from good evidence, to be a preparation of colchicum in rum, with colouring matter, more diluted than Wilson's tincture, but most probably a concentrated warm infusion. Its sediment, like that of colchicum in the other preparations, is insoluble.



SOME  
GENERAL CONSIDERATIONS  
ON  
*MORBID STATES OF THE DIGESTIVE ORGANS;*  
WITH  
PRACTICAL OBSERVATIONS ON GRAVEL.

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WHEN we consider the importance of the functions which each of the digestive organs respectively performs, from the first step of the process to the last in the office of nutrition; and how constantly we exceed our natural wants, and commit every sort of indiscretion in our daily habits of diet; it cannot, on the least reflection, be matter of surprise that some disorder of function should be a frequent consequence. So much indeed are the derangements of the digestive organs connected with all chronic diseases, that if a division of them were to be founded on the most successful mode of treatment, the labours of the Nosologist would be reduced within a small compass. The confidence in specific remedies for particular diseases is gradually dying away, as sound science advances; and of late years, true philosophy has begun to sway the practice of medicine, in making careful experiment and rational induction the basis of our theory, instead of vague hypothesis and popular prejudice.

The consideration which is due to the state of the digestive organs in the treatment of various diseases of serious magnitude, is exemplified in the most interesting manner by Dr. Hamilton and Mr. Abernethy, in their respective publications on the subject; and the

original views which they introduced must, I conceive, be ranked amongst the greatest improvements which the art of practical medicine has received. We no longer superficially allow of the application of tonics and nervous medicines for a weakened stomach and its attendant nervous sympathies, or for nervous forms of complaint; but we make it our care strictly to investigate the causes of such debility. Obstructions may exist below the stomach, and Nature may prudently have denied an appetite, when the powers of digestion are oppressed and interrupted. The nervous sympathies which attend these derangements, are now justly regarded as secondary forms of complaint, and are often found to yield, as by a charm, to the removal of the primary causes of irritation. The general doctrines of disease having thus received a legitimate improvement, it might be imagined that the consequent practice of medicine in individual diseases, and anomalous cases, would become equally clear and defined. Some improvement, however, in the laying down of our principles appears to me to be yet wanting. Rules of exact treatment, it is true, can only belong to experience, and do not admit of graphical delineation; but I cannot help believing that the principle of analysis upon which I have founded the preceding Treatise, may also be brought into useful application on my present subject. A great difference of opinion appears to prevail, both as to the particular viscus most commonly affected, and also as to the ratio medendi. By some, whatever organ or organs in the series may be affected, calomel is administered with the same freedom and frequency as the most simple purgative in the *materia medica*; and, doubtless, serious and irreparable mischief is often inflicted on the constitution by the abuse of this powerful agent.



Even simplicity, which to a certain extent belongs equally to philosophy and truth, may be carried too far, and lead us too much into a principle of generalisation. Dr. Hamilton's peculiar practice appears to consist in the continued employment of purgative medicines; so that not only a vitiated accumulation in the alimentary canal is prevented by the constant excretions which take place; but healthy action becomes excited by the total change of function which is thus produced. This, and not merely the effect of the removal of any particular accumulation, appears to be the necessary explanation of the mode of cure. In the space of time occupied in the treatment, the quantity of mere accumulation cannot bear any proportion to the ratio of total effect which is produced by the purgative plan.

Mr. Abernethy's method of treatment seems to be founded on the belief that simple error of secretion in the course of the alimentary canal, but in the liver more particularly, is the cause of the symptoms; and that this is to be obviated by means of treatment which tend rather to sooth and correct, than to act with any considerable degree of activity in promoting excretion. In the one case, a dose of calomel in combination with a purgative is chosen as the remedy; in the other, a milder oxide of mercury, and in a small dose, so as professedly not to produce any very sensible operation; and the action of the bowels is to be gently assisted by some very mild aperient.

The diseases treated of by these different authors are certainly very different in character. Dr. Hamilton brings under consideration a variety of important diseases, acute and chronic, successfully treated by purgative medicines. Mr. Abernethy has, in a most ingenious and philosophical Essay, treated of those general derangements of the system, which have appeared to owe their origin and



support to a faulty state of the digestive organs, and are almost non-descript in their exact character. As it is well known, he was led into his examination of the subject, by finding, in his practice as a surgeon, that local diseases often became evidently aggravated, and extremely untractable, from the disordered condition of the constitution. The practice of these eminent authors, as just observed, relates to diseases of a different class; but it also differs considerably, as it appears to me, in principle. For the sake of distinction, I shall call the respective methods, purgative, and alterative.

I am not prepared to enter upon the arduous task of pointing out all the respective indications, which may call for one or the other mode of practice; but I conceive that an arrangement of this sort is susceptible of some useful rules, and these I shall briefly attempt to offer. Not only is our principle of treatment to be varied in correspondence with the individual morbid diathesis; accordingly as the stomach, the liver, the spleen, the kidneys, a particular part or the whole of the alimentary canal may be affected, and whether separately or together; and further, according to the kind and degree of symptoms, the modifying influence of difference of constitution, and the nature of the constitutional disease under which the patient may accidentally labour; but also, the particular remedy chosen from the same class of medicines must be adapted to the particular intention, or set of intentions, which we wish to fulfil. This, indeed, is an extensive subject, and would demand a volume rather than a few pages for its discussion\*.

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\* For much valuable information "On various Diseases of the Abdominal Viscera," see the well-known Practical Treatise of the late Dr. Pemberton, whose loss is so deeply and justly regretted by the profession and the public.

When the constitution has a tendency to gout in connexion with a morbid state of the digestive functions, as I have already stated, diuretic aperients taken in moderate yet regular doses, together with the mild alterative use of mercury, usually constitute the most efficacious treatment; because, in addition to a faulty condition of secreting functions, there is a strong disposition to repletion and plethora, which is to be guarded against. Also, where the gouty disposition does not exist, if apoplexy or severe inflammatory erysipelas be the threatening disease; or if the patient be corpulent and of a full habit, and is affected with anomalous symptoms bordering on paralytic tendency; the same united principle of treatment is to be kept in view.

The modification of practice, according to the particular organ affected, is now to be considered.

When the stomach is the most affected part, as indicated by the symptoms described at p. 83, very decided relief will in many cases be afforded by an emetic of ipecacuanha; and the prompt removal of the offending contents of the stomach will often afford more immediate and decided advantage, than the continued use of a mere corrective. If mercury be administered otherwise than as a purgative, it is admissible only in very small doses, and precisely according to the rules of Mr. Abernethy. If, even with such doses, the fur of the tongue increase, the saliva become more viscid, and fœtor of the breath take place, it should be immediately abandoned. Eructations, or flatus of the stomach, constitute the most distressing symptom of dyspepsia\*, and are the immediate

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\* I lately saw a gentleman, who had for a long time suffered, in a distressing degree, from dyspepsia. Flatus, and an irregular action of the bowels, were his most troublesome symp-



effect of fermentation in the stomach, which arises from the incompetence of its powers to produce the first changes in the food after mastication. The use of tonics is certainly indicated; but they must be managed with great caution. Strong bitters irritate and disagree. The neutral carbonate of ammonia alone, in warm water or any medicated vehicle, or with the addition of lemon juice, so as to be taken in a state of effervescence, is an useful remedy. If this salt, however, be too stimulating, the carbonate of soda should be preferred; and either may be given in conjunction with infusion of cascarilla or columbo, and a small portion of aromatic tincture. Care should be taken not to produce nausea by any kind of medicine; and the bowels should for the most part be regulated by pills, rather than by any liquid aperient. The wasted state of body and debility which are consequent to urgent dyspepsia, must be treated cautiously with respect to purgatives, which, if improperly employed, carry off too much of the chyle, that is but scantily prepared. Thus saline purgatives, which operate on the whole tract of the alimentary canal, are less suitable than purgatives of slow solution in the form of pills. For this reason I am persuaded that many dyspeptic persons are injured by a course, and especially if long continued, of Cheltenham water. For the state of stomach now under consideration, proper preparation being made, and in the

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toms. Upon investigating the case, I discovered the presence of an inguinal hernia, and of which he had not been in the least aware. He derived such immediate benefit from the use of a truss, and so much improvement took place in the action of the bowels, that he almost derived his cure from the use of the instrument; the regular continuity of the canal being thus restored.



fit season of the year, a course of the pure chalybeate water of Tunbridge Wells exerts the most beneficial effects\*. Again and again have I seen the dyspeptic invalid receive renovated powers from the use of this water, when proper regimen has also been observed.

When the symptoms correspond with the description at p. 85, the stomach is only secondarily affected by the indigestion which prevails in the alimentary canal, and mostly in the duodenum. It is to be kept in view, that in this case the appetite is not deficient; and that the patient takes every day an excess of food, in proportion to the energy of the digestive and assimilating process. Here, I apprehend, we should blend the practice of Dr. Hamilton and Mr. Abernethy. It is advantageous to stimulate the bowels occasionally to full action by a mercurial purgative; and even with the alterative doses of a mercurial preparation, it often succeeds better to join with them a small portion of some purgative medicine,

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\* I may take the present occasion to observe, that in a very wet summer, as, for example, in that of 1816, the impregnation of this spring is very much weakened, although it is found to make up in quantity of supply in a given time, what it wants in actual strength. Thus, in the beginning of November, 1815, after an unusually dry summer, the spring yielded only one quart in a minute. In October 1816, after a singularly wet season, the supply in a minute was no less than three gallons and a half. Its impregnation was proportionably weakened. I find, that by comparing the effect of re-agents with the water, both as to the time and degree in which they act, with the results from the same re-agents at the time when I made my analysis, I can form a very good estimate of the strength of the water at any particular time. This is convenient, as pointing out whether or not some pharmaceutical preparation of steel should be added to the use of the water.

as the *pulvis alöes compositus et pulvis rhei*, with *sapo durus*, than to administer them separately ; because it is our particular object to stimulate the bowels, rather than to favour mercurial absorption. A draught, such as is described at p. 286, or that at p. 445, in conjunction with either description of pill ; or that suggested by Mr. Abernethy, with the infusions of senna and of gentian and some aromatic tincture, will be found advantageous. The two first-mentioned forms of medicine will probably deserve the preference, when acidity and flatus prevail, and especially when the stomach is in a feeble state ; but for the removal of habitual costiveness, the last description of draught, when joined with the use of the alterative pill, is often remarkably successful. If, with a debilitated state of stomach, the tongue has a pale appearance and a cheesy sort of fur, with a state of gum which looks spongy, and is familiarly known by the name of scorbutic, the administration of nitric acid diffused in the *cascarilla* or *columbo* infusion, is much to be recommended, and, for this condition of dyspepsia, may prove a better tonic than the alkaline bitter. In such cases it will be questionable whether the mercurial alteratives should be employed ; not on account of the use of the nitric acid, for when the two medicines are taken at distinct intervals, I have seldom seen any disagreement produced ; but because mercury, in the mildest form, usually proves unfriendly to the stomach of a patient of this description.

In the case to which I have alluded at p. 91, I found the treatment which I have just now described, after due perseverance, and with the union of exact regimen, succeed perfectly to my satisfaction. Nervous medicines, as intended to apply to the state of hypochondriasis, from which the patient suffered in a most distressing degree ; and steel tonics with Peruvian bark, directed in reference



to the debility and langour of the stomach and the whole system, which also prevailed, had been previously tried for many weeks. From such injudicious practice, slight palliation only, by means of the volatile stimulants, was afforded; and an aggravation and confirmation of all the symptoms had resulted from the misapplied tonics.

In the treatment of the symptoms enumerated at p. 95, we are to consider that the liver itself is the chief seat of disease. It is obstructed, and perhaps affected with some degree of chronic inflammation. Here then we find that a mercurial course of medicine, with the regulated daily action of some purgative, properly adapted in its activity to the particular case, proves of the most manifest advantage. In many cases, and particularly when we can distinguish the seat of disease, either from the tenderness of the part on pressure, or from any enlargement, the application of mercury, principally by inunction on the affected part, will be found more efficacious than its internal use alone. The warm bath is an excellent auxiliary. Even in this form of disease, I am persuaded that we should avoid the severe employment of mercury, which, so administered, rather does mischief as a poison, than renders benefit as a supposed specific. When much pain prevails in either hypochondrium, the use of blisters, and sometimes also of cupping, should precede the inunction; and mercurial purgatives should be freely administered. In slighter degrees of uneasiness in the side, the emplastr. ammon. cum hydrarg. may afford considerable service; or, should the skin be very susceptible to any cause of irritation, the emplastrum hydrargyri is to be preferred.

The terms *bile* and *bilious* are, doubtless, too indiscriminately applied, both in popular language, and by the profession. If the patient suffer an attack of indi-



gestion from incaution in diet; or if he labour under dyspepsia, whether derived from continued irregularity in regimen, or from the influence of other causes, the complaint receives the convenient name of bilious. When from such association of terms, the treatment is made to consist in a free use of calomel, it is obvious that a practical evil results from this error of language. If the seat of complaint be in the stomach alone, any active use of calomel should be a questionable point of treatment; and I may lay it down as a general rule of practice, that if the administration of mercury be at all required, it should be given only as an occasional purgative; or, if more repeated, it must be prescribed in its mildest alterative form.

There are two very opposite states of a faulty condition of liver, which I shall briefly point out. In the one, the biliary vessels are surcharged; and the bile, not passing off with adequate freedom by the intestinal canal, is in part absorbed into the circulation, and produces more or less of jaundice. The discharges are almost invariably dark, and highly bilious in appearance. In very chronic cases of this description, the liver acquires an increase of bulk, and may be, in many instances, discovered, by manual examination, projecting below the ribs in the right hypochondrium; and considerable tenderness is almost with certainty felt at the ensiform cartilage. In the examples to which I have alluded at pages 97 and 100, I had full opportunity to study this species of hepatic complaint. I considered that, from the misapplication of tonic medicines, which had been freely given, and the neglect of purgatives and alteratives, these patients had, for a long time, been suffering the serious evil of fixing their disorder. The nervous symptoms which afflicted them had been palliated by nervous me-

dicines and stimulating diet; whereas the correct and successful treatment in these cases consists in a judicious employment of the aperient and alterative plan, and in a regulation of the regimen. By such means the circulation of the liver will most probably be rendered free; its healthy secreting functions will by degrees be restored, and the nervous symptoms will vanish; thus affording a proof how entirely the symptoms were sympathetic, and of a secondary nature. I must state, however, that the occasional use of anti-spasmodic medicine is proper, and affords great relief to the urgent symptoms; but this constitutes only the palliative part of the treatment. In the case of symptomatic asthma, mentioned at p. 91, various tonic and antispasmodic medicines had been administered before I saw the patient, not only without relief, but with a material aggravation of the symptoms. The aperient and alterative course of treatment, together with regimen, completely effected a cure. In these cases, ass's milk proves a very useful adjunct.

The opposite description of case is that in which the liver is remarkably torpid in its action, as is shewn by the inert state of the bowels, and the absence of bile in the alvine discharges. The complexion is sallow; the appetite is deficient; the spirits are depressed. As comprising a course of medicine, my experience leads me to think more favourably of the *pilula hydrarg.* joined with an aromatic aperient, as the *pulvis aloës compos.* or the *extract. colocynth. compos.* than of calomel; and as an aromatic tonic aperient, I would particularly recommend the *decoctum aloes compos.* which may be joined with other ingredients, as at p. 286, the gentian root or *cas-carilla* bark being used, as the physician may prefer. Chlorine, of which I shall presently have occasion to speak, will particularly deserve a trial, should other



medicines fail. Horse exercise and the air of the country, form powerful aids to the influence of medicine. In the list of remedies for the torpor of functions, now under consideration, I may mention the agency of galvanism, as a remedy entitled to recommendation. I do not profess to have any considerable experience of its effects; but I should conceive that it would not be found equal in efficacy to the judicious use of medicine, except on those occasions in which, from the great want of energy in the organs of digestion, the action of medicines is found very imperfect and unsatisfactory. I am acquainted with some good results from its administration \* under such circumstances; but also, in a case in which I hoped much from this energetic stimulant, I was wholly disappointed.

The discharge of blood from the hæmorrhoidal vessels, which takes place *ad sedem*, is very commonly connected with an unhealthy condition of the liver, and seems to arise immediately out of an obstruction to the returning circulation from the intestinal canal through the vena portarum. Within certain limits such a discharge usually proves a source of relief; but if it continue for a long course of time as a daily occurrence, it becomes a serious source of debility, and requires that distinct method of surgical treatment which I have pointed out at p. 472.

In considering the question of the particular viscus which has been the primary seat of complaint, when a complicated case of disorder, affecting the digestive organs and the nervous system, comes before us, I am induced to believe that sometimes we too much overlook the influence

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\* It is but justice to M. La Beaume, of Southampton-Row, to observe, that he administers galvanism medically, with great skill and attention.



of the brain, and may fail in our treatment from confining our attention to the remote effects of disease. With whatever integrity the brain may be acting as an instrument of the mind, its physical functions (if I may be allowed the distinction) may be so disordered as to become the important source of serious secondary complaint. It is an organ, not only subject to physical causes of injury and disturbance, in common with the other viscera; but is, also, under the peculiar immediate influence of all our passions and emotions. It is highly probable, therefore, as a matter of theory, that the state of the circulation of the brain, and the condition of its nervous powers, should be frequently thrown into disorder, and have a powerful primary influence on the healthy action of the digestive organs. So far as the direct application of physical remedies to this organ is in our power, our chief assistance consists in those means of treatment which either increase or lessen the quantity of its blood, or which tend to make its circulation equal and regular. Much indeed is to be accomplished through the medium of the mind; and in this species of advice the physician must at once become the philosopher and the philanthropist.

In the case of a severe injury of the head, we see immediately the important connexion which subsists between the brain and the digestive organs. They are thrown into disorder: and such is the series of the diseased actions, that they reflect their morbid influence upon the brain; and thus a mutual kind of disease becomes established. This is the point of treatment which Mr. Abernethy has so much and so usefully considered; but whether in the just importance he has assigned to the management of the digestive functions, in cases of local injury, he may not have recommended too exclu-

sive a treatment, is a doubt which I myself am disposed to entertain.

In many most opposite and striking instances of disturbed action of the stomach, the liver, and the bowels, I have not succeeded in my treatment by purgatives and alteratives, until the brain itself has been relieved from a state of congestion, and which had been rather obscurely shown by the symptoms. Even in those cases, in which an obstructed state of the liver is the real cause of a morbid determination of the blood to the brain, at the same time that our radical treatment consists in removing such obstruction, it is important to give immediate relief to the vessels of the brain by the abstraction of blood. It must be our care to discriminate between the nervous symptoms which arise from opposite causes. Head-ache, vertigo, tinnitus aurium, pulsation, and a want of mental energy, may proceed either from an excess or a deficiency of blood in the vessels of the brain; and depletion or stimulus must form our consequent principle of practice.

Although therefore, in the majority of cases, the distinction of the symptoms, as to their indicating the prevalence of vascular action and congestion, or of nervous relaxation and morbid sensibility, proves sufficiently marked, yet it not unfrequently happens, that it is difficult to arrive at a clear practical conclusion.

When the disorder consists in increase of vascular action, there is usually a sense of weight and fulness in the head, and very probably the feeling of a tight hat upon the head, or a tight neckcloth around the neck. The symptoms of tinnitus aurium, irregular state of vision, giddiness, and head-ache, may belong to very opposite states of the brain; but when they arise from ner-



vous debility, the countenance, as whether being full and flushed, or sunk and pale, and also the pulse in its characters, will be a guidance to our judgment.

Sydenham, in describing the influence of the state of the mind on the functions of the animal œconomy, observes, "The patient must likewise use his utmost endeavour to keep his mind easy; for all disquieting passions, if they once become immoderate, greatly dissolve the texture of the spirits, which are the instruments of digestion, and so of course increase the *gout*."

With respect now to the excreting function of the kidneys, if it be allowed, as the truth indeed requires, that it is a material agent in the process of healthy assimilation, it must follow that considerable importance belongs to a medical acquaintance with the various morbid changes which the urine undergoes; and that we should carefully study the true indications which its external characters present. The relative connexion which subsists between the digestive organs and the kidneys is of a very curious kind; and it seems surprising that the particular state of the one should so quickly influence the other, when we consider that the blood which goes to the kidneys for the purpose of secretion, has first to pass, in part, the round of circulation. Also, as the office of the kidney is entirely excrementitious, how does it render this service to the whole of the circulating blood, when, in the first round of the circulation after the absorption of the chyle, it can only have acted on a very small part of the arterial blood of the system? I am disposed to conceive that several rounds of circulation take place before a perfect admixture of blood is effected; and that in this way only, the kidneys have the opportunity of performing their salutary action on the whole blood of the system. If a person be bled from the arm shortly



after dinner, the serum is entirely milky, as I have often witnessed ; and hence I derive a support to my argument.

The importance of the regular performance of the function of the kidneys is most strikingly exemplified in the few unfortunate cases which occur, of a paralytic state of those organs.

Sir Henry Halford, in a very instructive paper, in the 6th vol. of the Medical Transactions of the College, has described a case of this description, and has forcibly pointed out the necessity of a guarded prognosis, as to the probable termination of the disease, when the usual function of the kidneys is altogether suspended. He remarks (p. 412), “ It has often surprised me to observe, how small has been the measure of that excrementitious fluid, which the frame has sometimes thrown off, and yet preserved itself harmless ; but the cessation of the excretion altogether, is universally a fatal symptom in my experience, being followed by oppression on the brain.”

I have met with three cases of paralysis of the kidney, and I regret to add that they all proved fatal. The first patient was corpulent, yet robust, about fifty years of age. He had been many years subject to gout. He had contracted a gonorrhœa, and travelled to London from a great distance, in a very short time, the weather being intensely hot. A cholera morbus attacked him at the end of his journey. The symptoms were very severe ; but after two days they were so much subdued, that there was a flattering prospect of recovery. Now it was that the failure in the secreting action of the kidneys commenced. In the course of twenty-four hours delirium appeared. In forty-eight hours, comatose symptoms took place, and the unfortunate patient died at the end of seventy-two hours.

In the second case, the gentleman was aged 39, and

was also gouty. For a year previously he had been declining in health, having wasted in flesh, and been affected with symptoms of diseased stomach. He was subject to frequent vomitings, and having lost all appetite for many months, it may readily be supposed that he was fallen into a state of great debility. He was nervous in the highest degree, and the animal heat was so feebly formed, that with every artificial care it was almost impossible to maintain the heat of the extremities. Under such circumstances he contracted a lumbago, from the accidental circumstance of the omission of having his bed warmed. A most urgent and continued vomiting was the first serious symptom which appeared. In two days the secretion of the kidneys began to fail; and soon ceased altogether. He was affected with convulsions, which had the character of epilepsy. He died in sixty hours from the commencement of the failure in the function of the kidneys, not a drop of urine being passed. He was sensible at intervals to the last, but he was for the most part in a comatose state.

In the third instance, the patient was a corpulent female, sixty-eight years of age. At my first visit I found a state of great oppression of the brain; but the pulse was so rapid, and at the same time weak and small, that it did not appear proper to take away blood. Upon an investigation of the symptoms, it appeared that no urine had been passed for about thirty-six hours. A large blister was applied over the region of the kidneys, on each side; the bowels were stimulated freely by calomel, jalap, and a purgative mixture. A volatile saline draught, with the addition of *tinctura lyttæ*, was administered every three hours. The symptoms, however, quickly increased; the coma, as of apoplexy, became established,



and the case terminated fatally on the third morning after I first saw the patient.

Sir Henry Halford mentions, that in three of the five cases, the total number which he had seen in his extensive practice, "there was observed a remarkable strong urinous smell in the perspiration, twenty-four hours before death." I was not made aware of this symptom in either of the cases which I have related. I may take the liberty of observing that I should not be led to expect it, because it would appear that no urine is secreted, and therefore we should not look for its absorption. The bladder is most probably competent to its functions, but it is quite empty, as is proved by the introduction of the catheter.

In my previous discussion of the subject of the urine, I have dwelt at length on the nature of the pink and brick-dust sediment; and I shall now make reference to the observations which will be found at p. 104, 139, 166, &c.

At page 87 I have alluded to a case of functional disease of the liver, accompanied with a morbid secretion of mucus in the intestinal canal. I think it may be interesting to relate some further particulars, as the patient, a lady of about 38 years of age, is now convalescent. It was the most instructive and remarkable case which I have ever seen. It would be tedious to enumerate all the symptoms, and I shall therefore only mention the most remarkable.

The disease had been gradually forming during two years. When I was first consulted, I had occasion to observe the remarkably morbid state of the biliary and intestinal secretions. They were usually either black or of an olive green appearance, and much loaded with mucus, having the worst foetor. The urine deposited lateritious



sediment copiously. Just below the stomach I distinguished a circumscribed swelling, which, from its strong pulsatory action, put on the threatening appearance of an aneurism; but the result proves that it was merely receiving the beat of the aorta. The appetite was less wanting than the power of digestion, and such distressing sense of distension was felt after taking the smallest portion of solid food, that the patient found it necessary to confine herself almost exclusively to the use of ass's milk, as nourishment. The nervous system was morbidly sensitive in the highest degree. Indeed when it happened that the bowels failed to act very freely, the mental irritation was so extreme, as, for the time, to assume the character of derangement. The pulse was rapid; the skin was in a variable state; in the upper part of the body usually hot and dry, and the extremities remarkably cold. Any refreshing sleep was but seldom procured. In the progress of the case, broken down portions of biliary concretion were frequently passed; and on many occasions the dense mucus which was so abundantly secreted was a cast of the bowel for a considerable extent. Now and then the urine deposited an immense quantity of dense mucus.

The following was the result of a chemical examination of the intestinal mucus. Water assisted by moderate temperature did not produce any change. Treated with dilute muriatic acid, it entirely dissolved. By weak caustic alkali it was also dissolved. Digested in alcohol, its texture was rendered apparently more compact, and it assumed a corrugated appearance.

The effective part of the treatment consisted in the daily and active use of mercurial purgatives, for some months in succession. It seldom happened during the whole time, that less than four ounces of a mixture with

with senna and sulphate of magnesia, was taken daily; and often it was used in larger quantity, in addition to calomel, colocynth extract, and a small dose of James's powder. Auxiliary means were employed, as the warm bath, and the nitro-muriatic acid bath, which latter remedy rendered evident benefit in causing a more equal warmth in the limbs, in calming the nerves, and apparently aiding the medicines in their influence on the bowels. All the severe symptoms have passed away, and the patient is in a progressive state of recovery.

I return from this digression to some general points of consideration.

In a congested state of the vena portarum system, I have always found in the urine an excess of urea, and of all the other principles; and can affirm, that whenever the pink or lateritious sediment appears copiously deposited, it may be taken as a fair presumptive proof of this fact; and may be viewed as a correct indication for the use of diuretic purgatives, and of a corrective plan of medicine and regimen. Also it will be found, in this case, that tonics can seldom be employed without disadvantage. When such sediment is copious and long continued, the conclusion follows which I have mentioned at p. 150; and the treatment just recommended must be pursued with great perseverance.

If the sediment consists of the earthy phosphates, as indicated by the distinctions described at p. 170, 172, and 173, &c. it usually happens that supporting methods of treatment are required, in conjunction with the purgative and corrective; for I have constantly observed, that the patient, under such circumstances, suffers in some measure from debility and nervous irritation; and that, in the course of a paroxysm of gout, or of chronic inflammation of the liver unconnected with gout, the state



of the nervous system gives rise to these symptoms more or less remarkably, whenever the composition of the sediment changes from the urates to the phosphates.

It is sometimes thought to be of importance, that we should be able to determine with accuracy whether the urine of a person under a disease, or disordered action of the liver, is containing bile; and also to form some estimate of its proportions. I therefore instituted the following experiments, with a view to compare the delicacy of the muriatic acid as a test with that, very commonly chosen, of a linen rag. The following were the results.

Healthy recent bile added to healthy urine in the proportion of one part to thirty, was immediately rendered slightly green by muriatic acid, and this effect was distinct in two or three minutes. After some time it became grass green.

With bile and urine, one part to sixty, from the addition of muriatic acid, the green hue appeared distinct after two or three minutes.

When the proportions were of bile and urine, one part to 120, the green colour, from the addition of muriatic acid, was not very distinguishable until after twenty-four hours.

Bile and water, one part to 120, instantly yielded the green hue to muriatic acid.

The proportions even being one to 240, the change was apparent after long standing.

By means of the linen rag, the yellow stain distinctive of bile was only just distinguishable when the proportion of bile to urine was one to sixty.

Some urine of a jaundiced person, which in a short time produced with muriatic acid a light grass green, did not communicate any yellow stain to linen after being steeped for several hours.

I have lastly to notice an opinion suggested by Mr.



Rose\*, referred to by Dr. Henry of Manchester, as being a curious discovery, and supported by him with an additional example†, that, in hepatitis, the urine is devoid of its usual and very important constituent, *urea*. In the case of my gouty patient, mentioned at p. 297, the urine was almost destitute of urea‡; and, as I have stated at p. 320, the same fact appeared in six other examples; in all of which, however, the urine was also albuminous, and uric acid was equally deficient with urea. In these

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\* See THOMSON'S Annals of Philosophy, June 1815.

† Ibid. November 1815.

‡ The method which I used was to concentrate the urine very considerably, and then, having filtered it, to add to respective portions, nitric acid, and a saturated solution of oxalic acid. The pearly crystals, which, when urea is present in much quantity, appear almost instantly, and form indeed an unequivocal evidence, are well known. The oxalic acid acts more slowly; and, if the urea be in minute proportion, requires about twenty-four hours for its decided effect. The precipitate consists of small transparent crystals, which, as they are viewed without being washed, appear reddish in colour. They are easily distinguished from the white pulverulent precipitate of lime and magnesia, which immediately falls down with this re-agent. From some comparative experiments, I have found this to be a test of still greater delicacy to detect urea, than the nitric acid; and I have also Dr. Prout's authority for the fact. The method by the distillation of the urine to procure carbonate of ammonia as the evidence of urea, and this product put to the test by its powers of decomposing muriate of lime, originally suggested by Vauquelin, and adopted as the most delicate by Dr. Henry, appears to me rather questionable. Will not other animal principles in the urine furnish carbonate of ammonia at the boiling temperature?

cases the stomach was weak, and the digestive powers were impaired ; but I could not pronounce the disease to be hepatitis.

In six very clear cases of hepatitis, however, I have not only detected urea by means of nitric acid, and oxalic acid, but have also in each of these examples found a great *excess* of this principle. I am compelled, therefore, to believe that the cases of Mr. Rose and Dr. Henry, ought rather to be held as exceptions from the general rule, than to be chosen as the ground of so strong a conclusion as they have formed.

In the medical management of all the forms of complaint which I have considered, the strictest rules of regimen must be observed ; and without which the skill of the physician will be abortive. I shall endeavour to include all these considerations under the head of prophylactic regimen. A modification of practice in the treatment of the derangements of the digestive organs, which is of great importance, arises from the combination which they form with other states of disease, and which may be either of a primary or secondary nature.

Abundant examples of such blended states of complaint, will be found in the authors to whom I have just alluded. I shall confine myself to some slight illustration ; and probably I cannot choose any one more striking than the example of an irritable state of lungs, appearing in the form of troublesome cough ; uneasy respiration, easily quickened by slight causes, and accompanied with tenderness of the chest or occasional pain in the side ; which we occasionally see connected with more or less in number of the symptoms related from p. 88 to 92. Sometimes the patient makes the whole reference of the uneasy sensations which are felt, to the chest ; and great care is required in our diagnosis. The epigastric



region is usually affected with marked tenderness to pressure in these cases. The furred appearance of the tongue, the dyspeptic symptoms and peculiar state of the secretions, the absence of regular hectic and wasting, will be strong grounds of discrimination. Under such circumstances it is, that when our patient at first appears threatened with the quick and melancholy progress of *consumption*, the whole disease, after a patient course of treatment, will often happily yield to the co-operative plan of alteratives, mild tonics, and soothing sedatives, with such topical treatment as the case suggests. In urgent cases of this kind, the patient is said to have been cured of consumption; but the lungs have been only secondarily, and perhaps sympathetically, affected.

When a scrophulous diathesis is mingled with the disordered digestive functions, it is incumbent upon us to use mercurial medicine with the utmost circumspection. If carelessly employed, it will operate as a most injurious poison; readily causing ptyalism, fœtor of the breath, universal disposition to glandular enlargement, general debility, and an aggravation of the dyspeptic symptoms. If we employ mercury in such cases of peculiar constitution, we are almost restricted to its use, merely as an occasional purgative. In some instances of this kind, I have procured material advantage to the stomach, and to the system at large, from the use of *chlorine* as an internal medicine. I have given it in the form of a saturated aqueous solution \* twice a day, in the dose of half a

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\* Prepared by Mr. Garden, operative and general chemist, No. 372, Oxford-street. It should be carefully kept secured from the air and light, to prevent its decomposition. I always direct that the vial may be covered over with dark paper.

Far be it from me to depreciate the skill and attention of other



drachm, gradually increased to two drachms, in union with some simple vehicle. Diluted cinnamon water conveniently serves the purpose, and renders the chlorine sufficiently palatable. I must observe, that the chlorine readily enters into new combinations, and therefore is administered in its most pure and active form in water simply; and when the stomach accommodates itself to its taste and action, thus uncombined, it will sometimes

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chemists; but it is due to Mr. Garden to state, that he is extremely successful in the preparation of chlorine, by the particular process which he uses. I requested Mr. Garden to ascertain, by careful experiment, the relative quantity of chlorine held in solution in water at given temperatures. He favoured me with the following results:

“Water, at the temperature of 50° Faht. may be made to absorb  $2\frac{1}{8}$  times its volume.

“Water, at the temperature of 60° will absorb  $1\frac{3}{4}$  times its volume.”

Hence appears the importance, and indeed the fact is obvious on the least consideration, that the medicine should be kept in a cool situation. The most favourable method is to place the vial, inverted, in a vessel of cold water, in a dark part of a cold cellar.

Dr. Willan (on Cutaneous Diseases, at p. 360) speaks of the use of this medicine in the early stage of scarlatina anginosa, in favourable terms. He describes the dose as half a drachm for an adult, and for children ten or twelve drops. I have not found it necessary to administer it in such small doses. He points out the care required to prevent the deterioration of the chlorine; and quotes from Mr. Allen the following test for its state of purity. “When litmus paper is plunged into the true oxymuriatic acid, it is deprived of colour; but if common muriatic be present, the paper will instantly receive a red tinge, and thus ascertains that the preparation is unfit for medical use.”

be desirable so to administer it. In a weak and delicate state of stomach, however, I have often been much satisfied with its effects, united with a dose of tinct. cinchon. compos. and a wine glass of water. I have never prescribed the chlorine solution in a smaller dose than half a drachm, or in a larger dose than two drachms. I have administered it also in dyspepsia, and in the debility of the digestive organs, which sometimes is consequent to an active course of mercurial medicine; and certainly with great good effect in most cases, and without injury in any.

With a bilious patient (I thus express myself for the sake of conciseness) it very commonly happens that tonic medicines disagree in a peculiar manner, confining the action of the bowels, and proving unfavourably stimulating. The chlorine here recommends itself very strongly, as it particularly favours the regular action of the bowels. Its solvent powers are remarkable. I digested a very compact biliary calculus in an aqueous solution of chlorine, both concentrated and much diluted, and found that by each it was almost equally acted upon, broken down into very minute fragments, and deprived of colour, in the course of twenty-four hours. No such remarkable effect can be produced by the acids or alkalies, either concentrated or dilute\*. It freely dissolves calomel, converting

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\* Both nitric and sulphuric acids, if in a concentrated state, exert a considerable action upon the biliary calculus. The former effects a partial solution, which is of a pinkish colour; the latter acts more strongly, and produces a solution of a deep grass-green colour.

Nitro-muriatic acid, in a concentrated state, accomplishes a complete disintegration of the biliary calculus; and a considera-

it into a chloride of mercury. Care must therefore be observed not to give it in conjunction with this medicine, except with a due interval of time. If it be administered immediately at the close of a mercurial course, its action in increasing the soreness of the gum, and renewing the ptyalism, is very quickly shewn.

To mention further its general agency, I have to observe that the stomach very readily accommodates itself to the medicine, and indeed I have not seen it produce sickness or nausea, except in two instances, in which the stomach was evidently in a previous state of disturbance. The patient usually experiences a sense of exhilaration and improved energy from its use. It commonly acts as a diuretic, but does not irritate the bowels, unless they are very prone to be disordered. It is probable that both chlorine and iodine may be found very useful remedies in the treatment of scrophula. I have in several instances had cause to be satisfied with both medicines in this deplorable species of complaint; which so much sets at defiance all ordinary means of treatment.

To such general observations on this interesting subject, I must now confine myself; but, before its conclusion, I cannot refrain from taking a brief notice of the method of treatment by the nitro-muriatic acid bath or ablution, some time since introduced to our attention by Dr. Scott. Such is the difficulty of ascertaining the true character and value of any new remedy, that the investigation of

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ble effect, though much more slowly, is produced by the same acid in a moderately diluted state.

Muriatic acid does not appear capable of acting upon this kind of calculus, at ordinary temperatures. The liquor potassæ, either concentrated or diluted, has only a slight effect.



its merits cannot be too general; and the communications of every practitioner, which are offered with care and candour, are entitled to be received as useful. In a science so obscure and difficult as that of practical medicine, both doctrines and remedies must pass the full ordeal of time and opposition, before they should be admitted as substantial, or dismissed as useless. It is under such impressions that I proceed to the examination of the present very popular remedy.

The earliest statements on the subject by Dr. Scott, which I have seen, appeared in the second number of the *Journal of Science and the Arts*. At p. 202, he observes, "When in India, I was most anxious to discover a substitute for the mercurial calces, less injurious and equally efficacious; and I have not been entirely without success. I knew that the nitric acid acts most readily on the resinous matter of the bile; and I was in hopes that I might communicate such an acidulous state to the living body as should produce the effects that I desired." He states, that through the medium of the stomach the operation of this acid, if given to the wished-for extent, had proved injurious, and that, from its absorption by the skin, some important effects had arisen. In the conclusion of the paper, he again speaks of the good results of charging the body with some of the mineral acids, or their elements, by means of the skin.

In Part III of Mr. Charles Bell's *Surgical Observations*, Dr. Scott has annexed some remarks; among which I find the following: "I am not now convinced that a particle of acid enters the system. The effects I suspect arise from chlorine alone." It is evident that the author himself has no fixed position as to the rationale of the remedy; and it might easily be shewn that the views which I have quoted are not very tenable. In the ad-

mixture of the acids with water in the first instance, chlorine is but sparingly formed. When the liquor is afterwards warmed for use, and exposed in an open vessel, the little chlorine contained must almost wholly escape. Also, if it were contained in abundance, it ought to be shewn that the absorbents are capable of taking it up from the surface. The facts, however, respecting the remedy, and not the theory, are the points most worthy of discussion, and to these I shall now proceed.

I may first remark, that we have seldom any difficulty in the internal administration either of the acids or of chlorine. A question then naturally arises—is this apparently inefficacious mode of applying a medicine, which we can, with facility, use internally, really attended with any superior effects? And what is the nature and amount of such effects? Does the remedy certainly possess an active power; and is it worthy of confidence, either by itself, or as an auxiliary to other treatment?

Of the effects of any remedy of mysterious agency, the sentiments of the patient must be received with great distrust. He usually lends his faith to its operation, from a prepossession in its favour; and the influence of a mental impression frequently stands in the place of a positive and palpable effect. Of this truth, in the history of a thousand boasted medicines, of the metallic tractors, and of animal magnetism, we have abundant illustration.

I have made trial of this remedy, both by immersion of the feet, and by ablution of the whole of the lower extremities, in several cases which appeared to me the most favourably adapted to receive all the good effects which it should be capable of affording. The proportions which I employed were one drachm of each acid to a quart of water sufficiently warm.

One lady, suffering from dyspepsia and deficient se-



cretion of bile, but easily influenced by mercurial medicine, in having the action of the liver increased; of very irritable constitution, and with a thin and delicate texture of skin; sponged the legs and thighs very diligently for ten nights, but no apparent effect of any kind was produced.

A gentleman, whose liver had been diseased when in India, and who has since frequently suffered manifest derangement of this organ; such as degrees of jaundice, some pain and tenderness in the right hypochondrium, and a vitiated condition of the several secretions; when under the influence of such complaint in its most chronic form, gave trial to this treatment, and pursued it very steadily every night for five weeks. He was not sensible of the least influence from it, either on the bowels or kidneys. He thought that shortly after commencing its use, the uneasiness of his side was increased, but at the expiration of the above period, he could not trace any positive effects, or consider that he had derived from it any advantage. He acknowledges with full approbation the decided good effects of a plan of medicine, consisting of purgatives and the mild alterative use of mercury, which he has since pursued.

A lady of the most irritable constitution, highly susceptible to very gentle doses of mercurial medicine, or indeed to the agency of any active remedies, immersed her feet for ten nights, without the least apparent operation, except that the coldness of feet, to which she was much subject, was comfortably removed during the period of its employment.

Another lady, whose liver was evidently enlarged and in a state of bilicus congestion, always readily and beneficially acted upon by mercurial purgatives, immersed the feet and sponged the limbs for twelve nights; but,



with the exception that it warmed the extremities very comfortably, it did not appear to produce any effect; and she found it necessary, as usual, to resort to her aperient medicines to excite the bowels.

Lastly, I made trial of the remedy on myself, being at the time, as it is in common language expressed, slightly bilious. I found it produce in the extremities an agreeable sensation of warmth; and this was the more perceptible, as I habitually suffer inconvenience in this respect. Slight pricking irritation also followed. I continued the ablution six nights. Beyond this local action I could not trace any effect; and since, the occasional coldness of the extremities has returned. I examined the specific gravity of the urine, and also its general characters every morning, and could not detect in it any variation from the ordinary state; comparing the results with former examinations. Neither the action of the bowels, my appetite, nor my internal sensations, were in any degree affected.

It appeared to me, therefore, that it acted principally as a stimulating lotion, which by its penetrating qualities might excite the vessels of the skin to increased action; and as dyspeptic persons, and those who suffer from defect or irregularity of the bilious secretion, are usually affected with coldness of the extremities, I conceived this might be a mode in which it would do service. It has been suggested that its influence on the sentient extremities of the nerves may be similar to that of galvanism, and that such may be the *modus operandi*. This hypothesis is ingenious, and seems entitled to some consideration.

From the close sympathy existing between the skin and the alimentary canal, we can readily believe that some individuals who have a thin skin, and who possess

this sympathy in an exquisite degree, will find the action of the bowels suddenly excited by the free application of acid matter to the skin, and especially when they are in a state very susceptible to irritation. In this way the excretions of the liver, in common with the general action produced, would be increased; but such reasoning differs very much from that of assigning to the remedy the direct, and as it were specific, power of acting upon the liver. Dr. Scott observes (Bell's Reports, p. 363), "With people disposed to bile, it is necessary to keep the bowels very open during the use of the bath; for one of its effects, as I have said, and on which much of its beneficial tendency depends, is to produce a flow of bile into the intestinal canal." In opposition to my unsuccessful experience with this remedy, I hear repeatedly, from very respectable authority, the praises of its extraordinary powers. I cannot therefore presume to deny that the remedy may sometimes be one of considerable efficacy, although I have with very careful search after truth endeavoured in vain to procure useful effects from it. I admit that my experience with it has not been extensive, and therefore do not offer it as conclusive. I cannot help at the same time remarking, that when this remedy is brought forward in apparent opposition to the usual method of practice by mercury, we should proceed very carefully in our estimate of its powers; and it would be matter of regret that an active agent in medicine, and one which with *proper* use is really successful, should fall into unmerited odium from the inferior if not unworthy pretensions of the remedy now in question, which is certainly one very troublesome in its application, both as to the mode of its employment, and the time required, as stated by the author, for its use.

Mr. Bell, with much panegyric "on the obvious con-



stitutional effects arising from this bath," as he conceives, in ordinary disorders of the constitution, has offered an account of its use "in certain obscure cases of syphilis," which appears to me highly deserving of investigation. Introducing the subject, he speaks of this description of patient as being "half poisoned with mercury," and still suffering from his disorder or its sequelæ; and under such circumstances he appears to offer the present treatment chiefly as a substitute for a well-regulated course of mercury, or for sarsaparilla, milk diet, and country air. In referring to the operation of the remedy, he says, "We have seen salivation and sore gums produced in two instances." On reading this statement, the idea occurred to me, that, when the acid liquor is freely and repeatedly applied to the skin of a patient whose system is already highly charged with mercury, a chemical action would be produced on the surface; and hence, an active combination of the acid and vapourised metal (chloride of mercury) might be supposed to result. If this view be just, it would afford an explanation of the *modus operandi* of this agent in such cases; so that it might, on many occasions, become desirable to employ the acid bath in conjunction with a mercurial course; using less mercury on account of such combination; or to abridge the duration of the mercurial course, and follow it with the use of the bath. As far as the application of the bath is concerned, I would in any case advise the application of it for about five or ten minutes, twice or thrice a day, so as thoroughly to saturate the skin; in preference to the tedious period of half an hour, or an hour, which Dr. Scott recommends.

The following opportunity lately presented itself to me of putting the idea, which I have just now stated, to the test.

A young man, who had been pursuing a regular



mercurial course, with the effect of removing his primary symptoms, applied to me with a cutaneous eruption, which appeared to be the syphilitic psoriasis. His gum was very sore and foul, his tongue was furred, and the salivary glands were in considerable action. I directed such means as I judged the most calculated to restore the natural appearance of the gum. In about a week, this change being sufficiently accomplished, and when the silver watch which he wore was still entirely tarnished, I directed the acid bath and sponging, night and morning for ten minutes. At his next visit, three days after, the gums were very much swollen, of a luxuriant red, and the salivation was considerable. He was much better both in his feelings and in appearance. Pursuing the treatment, the eruption died away, leaving the skin scaly. After about eight days of the bath, the gum began to mend, although the acid remedy was still continued. No increased effect took place either on the kidneys or the bowels, in this case.

This was the report which I formerly offered respecting the nitro-muriatic acid bath of Dr. Scott. I have since followed up my investigation of the remedy, both by inquiry of those professional friends whose judgment I most esteem, and by watching its effects in the occasional instances in which patients have wished for a trial of it. From the profession I have received a varied testimony; but certainly the decision against the claims of the bath as a certain remedy—I must even add, to any positive effect which can be held important—has greatly predominated. A few, whose opinion I must consider as very respectable authority, certainly do continue to praise the remedy as often effecting that for the patient which is intended by mercury, with the additional advantage of being restorative to the constitution. For myself, I must confess

that I have not seen sufficient occasion to alter my former general opinion on the subject. I have again witnessed a fair trial of the bath in many favourable examples for its operation, and have encouraged the faith of the patient in the expectation of benefit. I have used the proportions which Dr. Scott prefers in the following admixture. Add to 16 oz. of water, separately, 10 oz. of muriatic acid, and 6 oz. of nitric acid. The usual degree of dilution which proves convenient to the skin of the patient, is, two ounces of this liquid to a gallon of warm water. The bath is conveniently renewed by throwing away a fourth, and adding the necessary measure of acids and boiling water, so that the whole liquor is immediately brought to the necessary comfortable temperature; or, the vessel containing the acid mixture may be placed in another vessel, supplied with hot water. In the cases of two young children, of thin skin and delicate constitution, indisposed with diarrhœa, unhealthy secretions in the bowels, deficiency of appetite, and loss of flesh, the bath has, under my own observation, appeared to do real service, in correcting the error which I have stated, and in improving the state of the constitution.

I have repeated the experiment just now stated, upon a patient strongly under the influence of mercury, and with a similar result and very good effect.

The foregoing is a reprint of the statement which I offered in my last edition. Since that period, I have made occasional further trials of the acid, and am well convinced that in certain delicate states of constitution, in which the biliary functions are irregular and unequal, it may be employed with a fair expectation of advantage. In two well-marked cases of this description, I was much satisfied with its effects. Mercurial alteratives had been given with freedom previously. The patients expressed particularly that they felt great improvement in the ge-



neral state of the skin, which became more uniformly warm and comfortable. Also there was a great abatement of nervous irritation. The alvine functions were certainly increased. My opinion is quite confirmed that the active agency of the bath is to be looked for chiefly when the system is more or less under the decided influence of mercurial medicine. Some sensible persons inform me that, even without this preparatory step, they derive from it a positive excitement to the action of the bowels, and, as they believe, an improvement in the functions of the liver; but from my own observation I cannot bestow this praise, and must add that even when mercurial alteratives have been previously used for a considerable time, I have often been disappointed when I had great expectation of success.

I will conclude with observing, as my conviction, that the acid bath, too much extolled for its power by some, and too much despised by others, deserves to be retained amongst the resources of medical art.

In the advanced stages of dyspepsia, it frequently happens that the stomach acquires a morbid sensibility in a high degree, being affected with nausea and vomiting from slight causes; its muscular powers are so weakened, that a small quantity of food only can be borne at any one time without pain and distress; and even upon the application of gentle external pressure, very exquisite tenderness is sometimes felt.

For this state of complaint, the local application of leeches gives great relief. A blister also usually affords benefit. Saline medicines and gentle aperients are required; very mild alteratives are useful; and an exact regimen must be observed as of the first importance.

For much excellent information, both theoretical and practical, I refer the reader to Dr. Wilson Philip's Treatise on Indigestion.



ON THE  
NATURE AND TREATMENT  
OF  
GRAVEL.

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WHEN treating of the predisposing causes of gout, I have taken notice of the external characters of the various sediments of the urine, and subsequently, under the head, "Of the theory of the symptoms," I have entered into some account of their chemical composition.

This preliminary view of the subject will serve as an introduction to the practical observations which I have now to offer on the nature and treatment of gravel.

In my investigation into the early history of gouty cases, I have learnt, from a considerable proportion of patients, that before they became subject to the gout, they were often affected with gravel; but that since the gout has supervened, they have, for the most part, lost the former complaint. Some relate that they suffered from the gravel in a very severe manner at an early period of life. I must nevertheless add, that such gouty persons as pursue a careless regimen of the kind which must tend to the production of gravel, will continue to have that complaint, and the two disorders will harass the patient, either separately or in conjunction, according to circumstances. Also if a stone should have formed within the kidney, or in the bladder, the symptoms

which it produces, will often co-exist with the gout; and in regard to this point, I have known instances in which the gouty patient, having undergone the operation for the removal of the calculus from the bladder, or, having voided it by the natural passage, has escaped a return of the complaint; and, as a general statement, I can affirm, that when gout becomes the disease of the constitution, the urine, for the most part, ceases to furnish the crystallized sediment which we denominate the gravel; but abundantly supplies that which is pulverulent in its form, and of the pink or brick-dust colour in appearance. The explanation of this phenomenon is, in my opinion, to be sought for in the altered state of the sanguiferous system. I have already stated, at p. 170, that the two sediments agree very much in chemical composition, and have suggested the idea, that the excess of animal matter and mucus which accompanies the pink and lateritious deposit, prevents the uric acid from assuming a crystalline form; for, in however abundant a quantity this kind of sediment may be found, it is completely soluble in the urine at its natural temperature in the bladder; even though a much larger portion of uric acid may in this manner be secreted, than in the urine which deposits crystals. Dr. Prout remarks on this subject, "This appears to be a wise provision of Nature; for if the uric acid were secreted in a pure state so abundantly, as the animal œconomy under certain circumstances seems to require, it would not be held in solution in the urine." This comparison of the change of constitution in the gouty patient is exactly in point, in considering the pathology of gravel.

That the one disease should apparently pass into the other at different periods of life, agrees with the general idea that gout and gravel have a very close connexion;

and most authors who have written upon the one disease, have also treated of the other. The analogy has been further supported by the well-known fact, that the uric acid is invariably the chief constituent of the gouty calculi, and most commonly of the urinary; and because it enters almost entirely into the composition of the red gravel, as it is called, and in a great degree of the coloured sediments already mentioned. Notwithstanding these close links of connexion, however, we must see an important difference in the doctrine which is applicable to the two diseases. The prevailing theory on the subject represents that gravel is a disease arising from an excessive secretion of uric acid; but, as I have mentioned at p. 126, the appearance of the crystals is not to be received as a proof of such a fact; although this conclusion is certainly just, in the case of a considerable deposit of the pink or lateritious sediment. In the example of the crystallized deposit, I conceive that a new combination of the uric acid takes place, rather than an increase of its proportions; and my grounds for this conclusion I have already stated. The influence of an excess of acid matter in the alimentary canal, appears to be the true exciting cause of this change of action in the kidney; or in other words, of that new arrangement of the elements of the urine, out of which the crystals, called the gravel, are produced. The class of persons, therefore, most liable to this disease, are such as live upon inferior diet, and take hard malt liquor, and have that species of indigestion produced which is accompanied with the acetous fermentation. Those, on the contrary, who habitually take a great excess of animal food, together with stimulating liquors, of the vinous kind particularly, produce not only acid matter in the alimentary canal as a consequence of the faulty digestion, but also gradually induce an excess of



supply to the circulating system beyond the power of healthy assimilation, and beyond the wants of healthy nutrition. In the former case, nutrition is deficient, and the body assumes the appearance of a want of adequate supply; but the gouty patient is exactly under the opposite circumstances, and bears, in his external characters, the stamp of repletion more or less strongly marked.

In the case of gout, the vessels, being surcharged with chyle, impose upon the kidney an increased exertion to excrete a part of that excess which cannot be properly assimilated; and thus, as it seems to me, not only is that disturbance in the natural balance of the elements of this secretion produced, which causes a separation of the uric acid from its usual combinations, but a considerable quantity of animal matter is also excreted, constituting the united product, namely, the pink or lateritious sediment; and hence my theory will appear to explain why gouty persons cease to have so determined a form of gravel as they had at an earlier period.

Nature, ever wise in her intentions, in all these morbid affections of the digestive organs, whether coming under the denomination of gravel, or gout, or indigestion, or bilious complaint, appears to employ the kidney for a beneficial purpose—to counteract the bad effects of the imperfect digestive process in the alimentary canal. That, in the case of gravel, the salutary effort of the kidney to carry off unassimilated matter should give rise to another kind of disease, does but add one to many other instances in the action of the animal œconomy under disorder, in which we see that the effort of restoration is sometimes itself productive of other form of complaint.

Of all the individual causes which have appeared to me to operate most strongly in giving rise to gravel, is

the use of hard ale. The class of persons making this liquor their favourite beverage, also very commonly take spirits either raw or mixed. I have in numerous instances seen the patient obtain almost a permanent cure from this disorder, by discontinuing such a baneful habit, and adopting a careful regimen.

In the ingenious Essay on Gravel, lately published by Magendie, the following causes are enumerated as chiefly productive of the uric acid species of this complaint.—“1st, An increase of the quantity of uric acid, the quantity of urine continuing the same, or not being augmented in a relative proportion to the acid. 2dly, A diminution of the urine, that of the uric acid remaining the same, or not diminishing in proportion to the quantity of urine. 3dly, A diminution of the temperature of the urine, the quantity and nature of it remaining the same as natural, or undergoing the modifications above described.”

I have stated, at p. 126, the error of concluding that the uric acid is of necessity in excess in the instance of crystals being found in the urine. Magendie speaks of the uric acid as being merely solidified; and other authors have previously considered the red gravel to be a concrete state of the uric acid, arising from its great excess; but, in addition to the fact just stated, I have repeatedly proved that it enters into new combinations. Also phosphate of lime is blended with the uric acid compound. I must therefore consider the formation of these crystals as derived from a species of indigestion which influences the action of the kidney, so as to alter the natural arrangement of the elements of the urine. In reference to the second position of Magendie, I must remark, that the deposition of uric acid does not happen as a consequence of a deficient secretion of urine, which



is of a deep colour and high specific gravity. Nor can I agree with the author in believing that a low temperature of the urine has any share in causing the crystallization in question. These crystals are insoluble in boiling urine. I am led to entertain an opinion that this crystallization takes place before the urine arrives into the bladder.

Further, it does not accord with my observation, that an excess of the use of animal food, producing a too great abundance of urea in the system, is a sufficient cause of gravel. Hence arises that kind of indigestion which is attended with a deposition of the pink or brick-dust sediment in the urine, but not of gravel, unless the influence of fermented liquors be added; of which, acid wines, perry, cider, but above all, hard strong ale, have the most noxious effect.

Of the very marked distinction which is due to the pathology of the two diseases, gravel and gout, I shall subjoin the following interesting illustration:

My friend, Mr. Travers, one of the surgeons of St. Thomas's Hospital, having noticed that several patients suffering from stone had been lately admitted into the hospital, from the district of country between Tunbridge Wells and Lewes in Sussex; and hearing that others had been the subject of operation in the country, or were still labouring under the malady; availed himself of a favourable opportunity of making some local inquiry into the facts; and I had the pleasure of accompanying him. We learned from an intelligent surgeon of Uckfield, that the gravel was prevalent among the poor in his neighbourhood, and that stone was of no uncommon occurrence. The class of persons to whom the disease was said to be confined, lived almost wholly on vegetable food, and upon the stimulus of gin and hard beer. They were of



course the labourers of the country, and were represented to be meagre in appearance, sallow looking, and by no means strong men. I examined a specimen of the domestic water of the village, which was common to the springs, and found it to be of remarkable purity; its specific gravity at 60° was only 1.0020.

From another medical gentleman in the neighbourhood of Tunbridge Wells, I learn that gravel is a very prevalent complaint amongst the poor country people, affecting men, women, and children. He has mostly noticed the uric acid species. He describes their diet to consist of vegetables, milk, hard puddings, pickled pork, cider, hard porter, and spirits.

I contrast therefore these accounts of the habits and appearances of persons suffering from gravel, with the representation which I have given of the gouty patient at p. 145 and afterwards; and an obvious inference follows from the statement.

Authors\* upon gravel have confidently stated, that the urine which deposits the crystallized, or the pulverulent and coloured sediment (pink or lateritious), is preternaturally acid. So strongly indeed does Mr. Forbes entertain this opinion, that he speaks of an influx of acid matter† from the alimentary canal; and both he and

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\* See, particularly, Forbes upon Gravel and upon Gout, and an Experimental Inquiry into the Nature of Gouty and Gravelly Concretions, by Thomas Egan, M.D. F.R.S.; Nicholson's Journal, vol. xvi.

† He also carries on the idea to the belief that such acid, taken into the circulation from the primæ viæ, detaches the uric acid from the circulating blood, and causes the gout by depositing the uric precipitate on tendons and ligaments, thereby ex-

Dr. Egan evidently consider, that the crystallized deposition from the urine is exactly analogous to the effect produced by the direct addition of any acid to healthy urine. Their experiments in proof of this opinion of increased acidity of the urine, are however very fallacious, and do not prove more than is offered by the usual specimens of urine of high specific gravity, obtained from persons in health, not depositing the gravelly crystals. These observations are also to be taken in connexion with

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citing that inflammation (see p. 98, 99, &c. of his Treatise, 2nd edition) which constitutes the gout. Hence one false hypothesis is built upon another; for no proof is offered of the presence of uric acid in the circulating blood. Afterwards this author observes, (p. 93) "The acid that occasions the precipitation may sometimes be phosphoric acid, of which the quantity is preternaturally increased; but more frequently it appears to be a strange acid introduced into the alimentary canal."

I formerly stated, that, in conjunction with Dr. Prout, I examined a flannel vest, which in different parts, from being long worn, was deeply reddened by animal matter, exhibiting appearances similar both to the pink and lateritious sediment; expecting that if the skin did secrete uric acid, it would be found under these circumstances. The coloured parts of the flannel were steeped in a dilute solution of pure potash, the liquor was filtered, and muriatic acid was added to a concentrated portion; but no uric precipitate followed. Respecting the question of a predominance of the phosphoric acid, I have already offered my details.

A second and very favourable opportunity occurred to me of experimenting upon this point. I examined, in the way I have stated, the flannel vest which was worn by a person throughout a severe paroxysm of gout. His urine deposited bright pink sediment very copiously. I could not discover in the matter of the cutaneous secretion the least trace of uric acid.



what I have said at p. 125. Whether the urine of persons who suffer gravel, be, *cæteris paribus*, more acid than that of persons in full health bearing a high specific gravity, cannot be determined without a series of careful comparative experiments. In the mean time, while I admit that the generation of acid matter in the primæ viæ is really the exciting cause of this peculiar action of the kidney, I deny the conclusion, that (as in the artificial experiment with urine and an acid) the crystallized precipitate in the disease called the gravel, is simply a deposit of the uric acid.

The same improvements in chemistry, which, a few years ago, led to the accurate knowledge of the composition of the urinary calculi, also became the foundation of a new method of practice in the treatment both of the stone and the gravel. Previously to this\*, although the urinary concretions had long been an object of notice with the chemists, and Scheele had discovered the existence of uric acid in the urine, the treatment of them was conducted upon one uniform principle of belief, that alkaline remedies would be capable of acting as solvents for calculi in general. The analysis which chemistry has

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\* Dr. Murray, in the fourth volume of his *System of Chemistry*, third edition, p. 590, has the following interesting observation:—"It is but justice to remark, that Dr. Wollaston's dissertation was published in the *Philosophical Transactions*, two years before the memoir of Fourcroy and Vauquelin was read before the French National Institute; and although the experiments of Pearson, published in the *Philosophical Transactions* the year after Wollaston's, are referred to in that memoir, no notice is taken of those of the latter chemist; yet they anticipate nearly every thing which the French chemists have announced as their discoveries on this subject."



within the last twenty years afforded, became the natural step to new and improved views in practice.

Mr. Brande, in "A Letter on the Differences of the Structure of the Calculi, which arises from their being formed in different Parts of the Urinary Passages; and on the Effects that are produced in them by the internal Use of solvent Medicines\*," has added several interesting facts to our knowledge; although I cannot help suspecting that the particular situation of the calculous concretion is dependant on accidental causes, and cannot be chosen as the proper ground of classification, either for the arrangement of the chemist, or for the guidance of the practical physician.

In the different situations of the urinary organs we find every species of calculus, and so indiscriminately blended, that the distinction in question seems to me wholly unsupported, and can only be well introduced as auxiliary matter of information.

Mr. Brande, in speaking of the earthy phosphates, remarks, "I am induced to believe that the last-mentioned substances, although the production of the kidneys, and held in solution†, are never met with in a separate state till the urine has been at rest, and therefore calculi from the kidneys are never composed of the phosphates."

Whatever may be the particular situation in which the calculus is found, it is clear that we must make reference first to the action of the kidney, and further, in the

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\* See Phil. Trans. for 1808, Part II.

† I have pointed out, at p. 172, that the suspended phosphates are not soluble in the urine, even at its natural temperature.

series of the causes, to the state of the alimentary canal. Every patient who suffers from gravel, complains also, more or less, of indigestion. The immediate cause of the calculous sediment or concretion is the altered action of the kidney, by which the elements of its secretion become disturbed from the healthy balance, and undergo new and confused arrangements.

The bladder is evidently the mere receptacle of the urinous precipitates, and cannot be in any other manner concerned in the present theory of the disease; although I am quite aware, that it does take the chief share in producing that concretion of the respective matters which we call the stone.

The comparative rarity of calculi composed of the uric acid and animal matter, as ascertained by Mr. Brande\*, is quite in agreement with the fact which I have stated, of the complete solubility of the pink and lateritious sediments in the urine at its natural temperature (see p. 105); and we may conceive, that without a very favourable nucleus a concretion of this kind would

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\* "The following is a statement of the composition of the different calculi found in the bladder which I have examined:—

16 were composed of uric acid.

45 ————— uric acid, with a small relative proportion of the phosphates.

66 ————— the phosphates, with a relatively small proportion of uric acid.

12 ————— the phosphates entirely.

5 ————— uric acid, with the phosphates and nuclei of oxalate of lime.

6 ————— chiefly of oxalate of lime."

never take place\*. Hence again the reason of the unfrequent occurrence of the stone among gouty persons.

The distinctions in the composition of calculi, afforded by the researches of the chemists, were very naturally hailed with satisfaction by the physician, who was taught to believe that the solvents, which acted in an evident manner upon the calculi out of the bladder, would most probably dissolve them, even in the bladder of the living subject. Such was the view at first conceived; but the impracticability of using solvents as internal medicines of sufficient strength soon appeared; and an attempt, which was more particularly followed up by Fourcroy and Vauquelin, was made, of injecting solvents into the bladder. This, however, for the most obvious reasons, was a practice that could not be pursued without producing effects from irritation, more than sufficient to counterbalance the advantages of any chemical result.

It was next the adopted theory, that although the power of medicine could not be confided in to the extent of procuring the solution of the stone in the bladder of the living subject, the principles of chemistry would still allow of very important application, for the purpose of counteracting the further formation of a calculus; and alkalies and acids were, as before, administered, although upon a different principle, according to the nature of the urinous sediment; and, from which, the judgment of the composition of the calculus should be deduced.

Mr. Brande, in a second paper†, has stated some interesting experiments and instructive facts on the medicinal effect of magnesia as contrasted with that of the alkalies; the preference of the former medicine, as a

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\* See account of the calculus, p. 175.

† Phil. Trans. 1810. Part. I.



remedy, having been suggested by Sir Everard Home, on the grounds that a neutralising substance, which was possessing the least solubility, would remain the longest in the stomach, and counteract "the formation of uric acid;" and that this was a more eligible practice than the fruitless attempts towards its solution when in a state of concretion.

The ingenuity of the idea was confirmed by experiment, as to the superior success of the remedy. A gouty person was also much relieved by its use, and hence, from that period, the employment of magnesia by persons subject either to gout or the red gravel has been in very general estimation.

Alkalies and acids, however, have still been cherished as remedies for the respective indications of a calculus consisting of the uric acid, and the earthy phosphates; and, indeed, Mr. Brande, in each paper, has, in concurrence with the general doctrine, advised the use of acids in cases of the last description.

It is now important to examine, what are the just pretensions of chemistry in relation to the practice of medicine, in complaints so important to humanity as the stone and the gravel; and first I shall discuss the treatment of the uric acid calculus.

I have already stated very fully the idea which I have been led to entertain of the cause of the formation of gravel; and, consistently with my experiments and conclusions, I cannot admit the propriety of the hypothesis which I have quoted, that by the chemical effects of magnesia the formation of uric acid is prevented; and I should rather state, that by the influence of remedies on the alimentary canal itself, the kidney is favourably influenced in its secreting functions, so that the separation of the uric acid from its ordinary state of combination no

longer takes place. This appears to me a distinction of some importance, as I shall presently endeavour to shew; but even if no distinctions in practice did follow from this difference of theory, the views of science demand that we should be accurate in our principles.

Further than this, I do not entirely admit the claims which are allowed to magnesia as a remedy in the morbid affections in question, and contend,—

1st. That although some advantage is afforded to the alimentary canal, by its power of neutralising acid matter, yet that its chief superiority over the alkalies depends on its purgative qualities; so much more easy is it to arrest the morbid process of indigestion, by a medicine which removes the cause, than by one which merely has the effect of temporary correction.

2dly. I condemn any unlimited confidence in this medicine, as being in most cases of complaint a very inadequate remedy for the disease which is existing. The gravel and the gout are, as it were, but the symptoms of the morbid actions of other parts; and such primary disease, and true cause, is to be found in the digestive organs. But the gravel has a deeper foundation than the mere production of acid matter in the alimentary canal. In these cases we must look with vigilance to the state of the stomach, of the liver, and of the bowels, and of all the stages of digestive assimilation, in connexion with the wrong function of the kidney, in a manner less superficial than the rule of placing all our dependance on magnesia, or upon any alkaline medicine whatever, seems to imply. We shall learn that these remedies may be useful, and even important, as auxiliary parts of treatment; but that they do not deserve any higher character, or stronger dependance.

A lady of delicate constitution consulted me on ac-



count of the uric acid gravel, which had distressed her frequently for several years. She complained much of indigestion; but her appetite was seldom deficient. She suffered pain in the loins and region of the kidneys almost constantly; and sometimes was severely affected in a transient manner, with a pricking pain darting down from the seat of the left kidney to the bladder, evidently in the course of the ureter. This patient had been under a course of magnesia and carbonate of soda, without deriving any advantage; but in one week after the alterative use of pilul. hydrarg. and a draught containing magnes. sulphat. infus. rosæ. with tinct. cardamom, and four drops of tinctura opii as a dose, repeated once or twice daily, she derived the most sensible benefit.

I merely relate this instance as one example amongst a series of cases which I could quote, of the superiority of the treatment by alteratives and aperients over the chemical remedies. I should observe, that, amongst the symptoms of indigestion in the above case, acidity of stomach was the most remarkable. The bowels were usually relaxed; but if accidentally in the opposite state, the nephritic symptoms were invariably much aggravated. Dr. Prout, in his paper "On the Chemical Properties and Composition of some of the proximate Principles of the Urine\*," has added his valuable testimony on the preference which is due to the medical treatment, rather than the chemico-medical treatment of gravel. I take the liberty of extracting from this paper the following observations, which are exactly in point:—"Vitiated secretions of every description must be the result of general or local causes, or of both united. But when we reflect how little liable the secreting organs are to be affected, and how seldom, in point of fact, they

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\* Medico-Chirurgical Transactions, vol. viii.



are affected, except through the medium of the general health, we are naturally led to look here for the primary cause of their derangement. The inference is obvious. Remedies, no matter of what description, that have a tendency to restore the general health, must have a tendency to insure the due performance of all the bodily functions, and secretion among the rest. I need not enlarge here upon principles which are well understood, and the elucidation and application of which are justly ranked amongst the greatest discoveries of modern medicine; but shall merely observe, that by paying proper attention to the general health, and especially to the functions of the stomach and bowels, I have in numerous instances witnessed the speedy removal of urinary deposits, and the complete restoration of this secretion to its natural appearance and properties. In adults, as is well known, both the phosphoric and lithic diathesis prevail, and often alternate in the same person. I have, however, generally, seen both equally yield to the same principles of treatment, and sometimes even to the same remedy, and am disposed to think, therefore, that they are more intimately connected than commonly imagined.

“ When we reflect that all urine (except perhaps in extreme cases of diabetes) contains both lithic and phosphoric acid, although only one of the diathesis generally prevails at the same time, the conclusion is probable, reasoning merely *chemically* upon the subject, that the exhibition either of acid or alkaline remedies may produce harm as well as good: and if we take into account also the capricious nature of secretion, and the frequent alternation of these two diatheses in the same person from unknown causes, it becomes an exceedingly difficult task to adjust the remedy to the disease; and the *chemical* probability will be, that the disease will ultimately be

increased, instead of diminished. Lastly, the *object* of the chemical practitioner is at best but of a secondary description, namely, to prevent the effects of disease rather than to remove it. From these and other circumstances, therefore, which might be mentioned, I have been induced to consider chemical remedies as palliative only, and to explain their acknowledged good effects even in this way, rather upon their general than their chemical operation."

Magendie, in his late essay, has chiefly confined his practical considerations to the uric acid species of gravel, and in conformity to his theory, that this principle is derived from an excess of azote in the system, directs a restriction to those articles of diet which contain the least azote. He relates two cases in which the patients almost confined themselves to the use of sugar for their support, eating frequently more than a pound daily. The gravel disappeared; but after some weeks, the plan was laid aside, from its causing debility of the stomach and disorder. The following diet is recommended by the author:—"Without doubt, bread, particularly that made of rye-flour, pastry, the farinaceous legumens, Italian paste, rice, potatoes, the green legumens, sugar, &c. may be advantageously employed as food, particularly when simply prepared; with these the patient may, without danger, satisfy his appetite. He must not, however, indulge in the use of these substances without regulation, as some of them, such as wheaten bread and pastry, contain a considerable portion of azote. When patients adopt this regimen, they must avoid spirituous liquors, and wine in an undiluted state, and they ought to drink copiously of aqueous fluids: such liquids rendering the urine more abundant without increasing the quantity of uric acid, will necessarily diminish the proportion of the latter to



the former.”—In prescribing the free use of any agreeable aqueous liquid, so as to increase the quantity of urine and prevent the solidification of the uric acid, he expresses that ten or twelve pints daily will form a proper quantity if the disorder be severe. He next considers the means of saturating the uric acid; and enters into the common theory and practice of employing the alkalies, concluding with this observation: “But whichever of them may be employed, its evident effect should be an alkaline state of the urine\*, without which nothing can be expected from them in the cure of gravel; at least, no result which can be theoretically accounted for will be produced.”

A case is related of a merchant who was alternately prosperous and in adversity, and lived accordingly, suffering both gravel and gout, when he indulged in the pleasures of the table; and obtaining an exemption from both complaints, as the necessity of abstinence occurred.

I have offered this brief abstract of the opinions of this author, because his celebrity is calculated to give new weight to the chemical method of treatment, with the addition of a severer mode of regimen than has hitherto been laid down. As I am led to entertain very different

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\* I have just examined the urine of a gouty gentleman, who suffers from a constant secretion of uric acid and soda (*chalk stones*) in his hands and feet, in a far greater degree than any patient who has come under my observation. It reddened litmus in the usual manner, after becoming cold; and yet, from the addition of muriatic acid, not the smallest precipitation of uric acid was produced. Hence would it not appear that the acidity of the urine is not to be referred to the uric acid? And it appears to me to give considerable support to the hypothesis which I have offered at p. 155.



views on the subject, I wish to place the question before the profession as distinctly as my limits will admit, for their adjudication. I should explain the advantages of a plan of abstinence described by Magendie, rather upon common principles, of giving repose to the digestive organs, and thus altering the action of the kidney, than upon the theory of merely lessening azote. I learn by a recent communication from Uckfield, that the indigent patients, whose looks bear but little marks of repletion and of any excess of azote, suffer for the most part from the uric acid gravel. I would state that the patient should carefully pursue a regulated regimen, but that this should consist of a mixture of animal and vegetable food, every indigestible article being avoided; and that the drink at the dinner meal should be confined to water rendered conveniently agreeable, or soda water; and a limited quantity of sound wine. I strongly object to large quantities of even aqueous drink, as tending to weaken the stomach and bowels by the distention which it produces. A continuance of the low regimen recommended by the present author, would, in my opinion, tend to produce much more evil to the constitution, than the inconvenience even of a complaint so troublesome as gravel.

On the effects of the chemical treatment contrasted with the use of alteratives and aperients, I have already offered my sentiments.

The administration of acids, and especially the muriatic, in the case of the earthy phosphates appearing in the sediment of the urine, is still recommended by recent authors in general, on the chemical principle of specifically counteracting such a secretion. Mr. Brande has further detailed his opinion on this subject in a late ingenious paper in the *Journal of Sciences and the Arts*,

vol. vi. As it would appear from the ordinary theory, that the agent which holds the earthy phosphates in solution is an excess of phosphoric acid, it seemed to follow that in the event of a solid deposition consisting of the phosphates, the free acid was lost, and the urine must consequently become alkaline. The reasoning of Berzelius which I have quoted at p. 127, demonstrates very clearly the fallacy of this doctrine; and I have now arrived at the end of an extensive examination of specimens of urine depositing the phosphates, *not crystallized*, and also holding them in solution, yet still having the power of reddening litmus in the usual manner. I have also examined the urine of patients pursuing a course of the liquor potassæ in the quantity of two or three drachms a day, and of others under a long course of magnesia, or the pure or carbonated alkalies, and have not found a single exception to this fact. I suspect, therefore, that the opposite statements have often been made from hypothesis only; and for the sake of correspondence with the supposed theory to which I have just now referred.

I have here, however, to mention a curious fact, which I have several times witnessed, that if the vegetable alkali be given in union with lemon juice, in free doses, and at short intervals, and especially, I think, if in a state of effervescence, the urine soon becomes alkaline, and exhibits on its surface a great abundance of the ammoniaco-magnesian phosphate crystals\*. The knowledge of this result has of late particularly inclined me to

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\* I wish to point out this distinction. The urine is alkaline, when these crystals are formed; acid, when the sediment is pulverulent.



prefer the saline form of the draught mentioned at p. 198, usually also directing it to be taken in the state of effervescence, during the symptoms of acute gout, when the uric acid is deposited in great excess, as evidenced in the pink or lateritious sediment. While this diathesis prevails, the effect upon the urine just now described is not easily produced. I should add that the crystals are so infinitely fine, that no sensible irritation is produced by them. They will disappear also very quickly after the discontinuance of the medicine, or from the administration of an aperient.

Returning from this digression, I must refer to the prevailing opinion of authors upon the skilful delicacy which is required to administer the alkalies and acids in calculous complaints, lest the happy balance of affinities should be destroyed by such inaccuracy; and that from the want of a necessary knowledge or attention, we should add to the one or other species of disease, accordingly as our corresponding medicine should be misapplied.

That the mineral and vegetable acids will influence the state of the digestive organs very differently from the alkalies or alkaline earths, is a truism which I cannot wish to dispute; but the propriety of their administration on the chemical principles already stated I must entirely deny. Also, if we had it in our power to controul the action of the kidney with such facility, our judicious intention would be frustrated, from the circumstance, that the urinous sediments, and calculous concretions, are for the most part of a mixed nature in their composition.

If a white sediment appear in the urine, not of a mucous nature, it must either consist of the urate of ammonia, or of the earthy phosphates. If the former, the



sediment will dissolve in the urine on its being heated; but this will not happen with the phosphates.

I have had very common occasion to remark, that when the deposition of the coloured sediments, either pink or lateritious, change to that of the phosphates, that instead of the plethora of the habit and the state of vessels bordering upon inflammatory action, which usually accompany the deposition of the coloured sediments, more or less of debility, joined with a morbid sensibility of the nervous system, commonly prevails; and hence, the mineral acids which act as tonics to the stomach, will often be found useful. If the change in question be from the coloured sediment to the colourless one of the urate of ammonia, correctives and mild aperients are still required, but also the use of a tonic is required; and with this view I should much recommend the preparation of sarsaparilla, described at p. 288.

To point out once more the error of expecting to produce a chemical change in the state of the urine by medicines, either alkaline or acid, as they are usually administered in the modern chemical treatment of gravel, I may first refer to the experiments of Mr. Brande, in which he made trial of very large doses of the alkalies, and was led to judge in that experiment which is most in point, that the effect of the alkali in becoming predominant in the urine "was at its maximum, probably in less than a quarter of an hour after it had been taken into the stomach; and in less than two hours the whole of the alkali had passed off." I have already related the results of my own experience in general practice with alkaline medicine, in regard to the present question.

Berzelius says, "it is often impossible to diminish the acid of the urine by the use of alkali, in those who suffer from an excess of uric acid; and I have myself tried in

vain the effect of acids in neutralizing or acidulating an alkaline urine. A middle aged man was laid up with the gout: his urine was foul and alkaline, holding the earthy phosphates suspended in an undissolved state. I gave him the sulphuric acid, without any change; and afterwards the phosphoric, without any effect, until its dose was so much increased that it became laxative: the urine then became acid, and deposited uric acid as long as the laxative effect continued, but no longer, although the dose of the acid remained unaltered.

“Lastly. I tried the acetic acid, and with as little success\*.”

Having now pursued this theoretical discussion to a sufficient length, I arrive at a conclusion, which I have verified in numerous cases, that in proportion as our means of treatment, in the calculous affections of the kidneys, are most favorably adapted to restore the healthy state of the digestive organs, they are, in the same ratio of effect, calculated to correct and remove any errors in the secreting action of the kidney itself.

A careful scientific observation of the sediments of the urine is important in a two-fold point of view. It is the surest ground which we can take for the anticipation and prevention of that calamitous disease the stone; and it likewise offers a valuable source of information, by enabling us, according to my experience, to discriminate the particular morbid states of the digestive organs, and the relative condition of the sanguiferous and nervous systems.

When the urinous precipitate is of the uric acid description, we find in association with it such a prevalence

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\* View of Animal Chemistry, p. 107.



of acid matter in the alimentary canal, that the use of the alkalies, and the alkaline earth magnesia, occasionally becomes of important service as auxiliary medicine; but when we reflect on the fundamental truth, that the gravel in its determined forms, no less than the gout, is a disease created by long continued errors of diet, it must at once appear demonstrated, that a more radical method of treatment is required, than such medicines alone can accomplish. The cure is to be found in the judicious employment of purgatives, alteratives, and corrective tonics; and, for permanent security, in the just regulation of every part of the general regimen.

In addition to the description which I have already given of the class of persons most liable to gravel, I may observe, that, in adults, the uric crystals (red gravel) prevail with the greatest frequency; and in children, the sediment in which the phosphates abound or alone exist, commonly called white sand, is the more usual occurrence: but, both in adults and in children, we meet with the two species of crystallized precipitate mixed; and this still more frequently happens, when the sediment is pulverulent.

The question of selecting the use of the mineral acids, when the crystallized sediment is consisting distinctly of the phosphates, is now briefly to be considered.

Mr. Brande, in the paper to which I have last alluded, has fully entered into the subject of the use of the mineral and vegetable acids, in cases of the present description; advocating their employment upon chemical principles, with the same force that he recommends the alkalies, when the crystallized sediment consists of the uric acid compounds.

In several cases the most exactly adapted to my purpose, in which the sediment consisted of the mixed phos-



phates without any portion of uric acid, I made trial first of alkalies and acids, separately, and precisely according to the chemical theory; but with no permanent good effect; and in some instances with the disadvantage of causing painful irritation by means of the acids. Certainly I did not disturb the uniformity of the chemical state, which is so much talked of, and substitute the deposition of the urates for that of the earthy phosphates. Nature herself is often capricious in producing this change, but it is very little amenable to the influence of art. I next prescribed occasional purgatives, and, as a daily plan of medicine, a combination of the carbonates of soda and magnesia\*, with sulphate of magnesia, to be taken in any simple vehicle, with the addition of lemon juice, so as to make it an effervescent draught. Together with this draught, I directed a mild mercurial oxide, in the alterative dose, with rhubarb and soap, and also enjoined a strict plan of diet and regimen. I thus perfectly succeeded in effecting a permanent change in the action of the kidney; and in due time, directing the use of stomachic tonics, the health became entirely restored.

Magendie, who has argued so strongly in favour of the use of the alkalies when uric acid, as he believes, is in excess, that he speaks of the use of magnesia in a quantity of ten grains to an ounce or more in the twenty-four hours! expresses himself in the following discouraging terms upon the employment of acids, when the urinary sediment consists of the phosphates:—"I have several times endeavoured to attack the phosphate deposits from

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\* When the urinous sediment consists of the phosphates, we find reason to believe that the acid matter produced by indigestion equally abounds in the alimentary canal, as when the urates are deposited. This is at least true as a general statement.

the urine, by the mineral and vegetable acids, and have never obtained any satisfactory result. It has indeed appeared to me that the deposit has been increased by these means."

When inflammation has been excited in the kidneys, the ureters, or the bladder, by means of the calculous crystals acting as irritating foreign bodies, the usual means of treatment as for the phlegmasiæ in general, are for the most part to be employed. If the inflammatory diathesis prevail, bleeding must not be neglected. Local cupping will often prove very useful. The warm bath is a remedy of unequivocal propriety, and often affords very prompt and material relief. Purgatives are of indispensable importance; and the use of calomel and James's powder, with a portion of the colocynth extract, jalap, or rhubarb, in conjunction with a saline purgative, usually insures the best effects. Respecting opiates, I think it necessary to make a few observations. The spasmodic nature of the pain which attends the nephritic attack, would seem, on the principles on which I have before advocated the use of opium, to demand and justify its free administration; but some exceptions in the present case of suffering are to be pointed out. It is our object to promote the secreting action of the kidney; to dilute the urine, and so to increase its actual quantity by the influence of the mildest soothing drinks, very freely taken, that it will at the same time be less stimulating to the passages under inflammatory irritation, and by actual distention of them produce the effect of dislodging and carrying off the minute calculous concretions. - Experience shews us that the effect of opium very usually tends to keep the secreting function of the kidney, when it is under inflammatory irritation, in further restraint, even although it be used in



combination with purgatives. Upon this general principle, therefore, the internal use of this medicine must be matter of consideration; and we shall sometimes find it more advantageous to administer it in the way of injection into the bowels. This practice should be pursued with very great freedom in the dose. In conclusion, however, I must be permitted to observe, that if such intense and sudden pain, as sometimes afflicts the patient, call for instant relief, we shall find that we cannot withhold the prompt and ample exhibition of opium; and which, administered on the principles I have stated under the head of Narcotics, even with all the general objections just now stated, will hold its sure dominion over the present most immediate evil, the pain of the attack.

In the following case of acute nephritis, which occurred to a medical gentleman, fifty years of age, of full habit and of the sanguineous temperament, the good effects of the warm bath are happily shewn. His habits of living were indulgent, but not excessive. He stated that most commonly his urine deposited either pink or lateritious sediment. He had never been affected with gout. The bowels were habitually inactive, and he experienced occasional indigestion. One morning, when thinking himself as well as usual, he was suddenly seized with an acute pain in the situation of the left kidney. In half an hour urgent vomiting took place. The pain passed down in the course of the ureter to the left testis, which was strongly retracted. The efforts to pass urine were very constant and agonizing, and it was voided only by teaspoonfuls. He was free from fever, and the pulse was not affected. He lost sixteen ounces of blood by cupping on the loins, with a little relief. He rejected from the stomach fluid purgative medicines, retaining



however some calomel. Two hours elapsed without any material ease being procured. He then used the warm bath, and almost instantly obtained from it delightful relief. He went into bed freed from acute pain, complaining only of a dull heavy sense of aching across the loins. The stomach soon retained purgative medicine, and by means of which the cure was in a short time effected. He had reason to suspect that he passed some gravel when in the bath. By careful regulation of the bowels, and proper attention to regimen, this gentleman has passed over twelve months without any return of complaint.

I shall offer a few additional cases of acute nephritis, in order to exemplify, in a more striking manner, both the nature of the complaint, and its appropriate treatment.

A gentleman, aged 43, many years subject to gout, but having been free from an attack, was seized suddenly with a pain intensely severe in the left lumbar region in the situation of the kidney. He had the sensation of a piercing instrument being forced into the back. He was soon affected with vomiting. He had frequent irritation to pass his water, which was quite clear, and at first not high-coloured. The pulse was particularly slow. It was evident that the kidney was the seat of the complaint. A full dose of opium was administered, and free doses were repeated at short intervals. A large bag of hot camomile flowers was applied in the usual manner. The pain was overcome by these means, and purgatives were next administered. Soon, however, the symptoms returned with violence. The loins were cupped freely. The anodyne doses were repeated; the bowels were kept

under the influence of calomel and purgative medicine. The warm bath was used repeatedly, but in this instance not with any apparent benefit. The pulse now became increased rather beyond the natural standard, and was too full. Some blood was taken from the arm. The case proved more tedious and troublesome in the relapse of symptoms than might be expected; but at length the whole disease yielded; and it is remarkable that one portion of gravel only was passed, which did not seem sufficient to account for the symptoms, which were of unusual severity. Some months after, however, calculous portions of considerable size were passed from day to day, which caused distress of the usual kind which attends the expulsion of gravel from the bladder. It would appear therefore, that, on the first attack of the kidney, the calculous matter was producing irritation without changing its situation so as to enter the ureters. In the treatment of the last mentioned symptoms, aperients, alkaline medicine, and turpentine, proved materially useful.

By a careful attention to regimen, and a due regulation of the bowels, this gentleman has continued for a long time free both from the gravel and the gout.

A gentleman, aged 69, who once only had gout many years ago, became subject to occasional attacks of gravel, which were of the most painful nature. I shall briefly describe one of these attacks.

He had been riding on horseback on a cold afternoon, and was sensible that he had received a chill. He was seized very suddenly with the following symptoms: As usual in his attacks, the pain commenced in the loins, but soon extended round to the groin and hip and down the thigh. The testicle was retracted on the same side on which the pain was felt. The torture was extreme. The desire to pass urine was incessant,



and it was bloody. The bowels were confined; there was urgent vomiting, and also a high fever of irritation. Bleeding from the arm, large doses of opium, the early use of calomel and purgatives, and the warm bath, removed the acute paroxysm. In the course of twenty-four hours, portions of uric acid and gravel were passed, and from this moment the patient did not suffer any further pain. The calculous portions were small in size, and produced sensations of cutting pain, and heat in the urethra; but it seemed remarkable that they should be sufficient to produce such intense symptoms of suffering. In the intervals of the attacks which returned three times about every ten weeks, riding on horseback always occasioned the urine to appear bloody, and produced pain in the loins.

A careful regulation of the bowels, a mixture with the decoction of the uva ursi, henbane, and the carbonate of soda, proved very useful; but the regimen also was carefully regulated.

One patient in a nephritic attack has complained of feeling the whole abdomen swollen, and heated "as if on fire;" and this symptom existed together with a retraction of the testicle, an agonizing pain in the direction of the ureter, frequent and most painful irritation in passing water, which was coloured with blood. The attack terminated with the expulsion of small uric acid calculi. The first symptoms were relieved by large doses of opium, and the warm bath. The cure was completed by the use of calomel and purgatives.

The calculi which have been passed by the urethra from gouty patients who have consulted my advice, have chiefly consisted of uric acid, and have been of the form of a lemon kernel.

A nephritic attack does not always terminate with the



discharge of gravel. A gentleman had two severe attacks, in each of which he experienced a cutting sensation in the urethra, and especially in the glans, and yet no other sediment appeared in the urine except that which was lateritious and pulverulent.

A gentleman, aged 34, of delicate constitution, was labouring under a troublesome gleet as the consequence of gonorrhœa. He had occasion to stand for several hours in a court of justice, and was afterwards exposed to cold. For some days before, he had frequently passed minute gravel consisting of the earthy phosphates. On the evening in question he was seized with rigors, an urgent tenesmus of the bladder, a cutting pain at the glans penis, and the urine was bloody. Notwithstanding the most prompt and appropriate treatment, the severity of the symptoms increased to a degree almost beyond endurance. Opium relieved the pain, but produced such distressing vomiting that it was but an exchange of suffering. It was then administered by injection, certainly with relief, though still deranging the stomach. He described that he felt a heavy oppressive pain over the pubis, as if he had held his water for a long time. He had great aching in the loins, and complained of a soreness in the testes as if they had been bruised. The least movement of the body exceedingly aggravated the symptoms; and indeed it was altogether a case of the most severe nature. Leeches were applied to the groins, pubis, and perinæum, repeatedly with great advantage. Poppy fomentation was used every four hours. The hip bath was also used. Henbane and extract of poppy were substituted for the opium; and invariably relief was derived from the effects of aperient medicine. A mixture, consisting of the tartrate of potash, infusion of senna with the tincture, and syrup of the marsh mallow, produced very

good effects, in conjunction with occasional doses of calomel. By degrees, the patient perfectly recovered.

This was a case of inflammation of the mucous membrane of the bladder, occasioned by the combined influence of gravel, and of exposure to cold, at a time when the urinary organs were in a state of great susceptibility from the previous long standing complaint.

In the following case, the patient, a gentleman between 50 and 60 years of age, had been distressed with urgent tenesmus of the bladder for many weeks. If he took walking exercise, he was affected with painful provocation to pass his urine every five minutes, and it deposited mucus of puriform appearance very copiously. The urethra was free from stricture, and the bladder from calculus; but the prostate gland was much enlarged, and this was the cause of all the symptoms. Upon the introduction of a flexible catheter after his utmost effort to empty the bladder, nearly a pint of urine was drawn off, and this circumstance is very characteristic of an enlargement of the prostate gland. A plan of medicine which consisted of alteratives and mild aperients, with the carbonate of soda, the uva ursi in decoction, and henbane, in conjunction with a warm sea bath every second or third day, afforded much benefit to this patient; but the still more important part of the treatment consisted in the assistance given by the surgeon. In cases of this description, it is of infinite consequence that the bladder should be emptied of its contents at least once every day, by means of the flexible catheter. The neglect of this treatment may very probably lead to the formation of a calculus which would consist of the ammoniaco-magnesian phosphate, for the urine by stagnation would undergo decomposition.

Many persons are subject to the chronic form of ne-



phritis calculosa, or, in other words, suffer from the gravel occasionally, but do not experience the severe acute attacks which I have just now described. They are informed of the complaint by a dull aching pain in the loins generally, or on one side particularly, together with a sense of heat; and soon complain of most of the symptoms which belong to the acute disease, in a very minor degree. In the urine first passed in the morning, and in that passed in the evening after dinner, gravel usually appears. The bowels are commonly irregular; and, in some constitutions of the nervous temperament, the stomach is affected with nausea and occasional vomiting.

In the treatment of this chronic form of the complaint, our best remedies will be the use of alteratives and aperients; of the warm bath every second or third day; and, I should name as at least of equal importance, regulated diet, and general regimen\*.

In concluding my present subject, I am happy to avail myself of a communication with which I am favoured by Mr. Arnott, of Bedford Square, respecting the solution of stone in the bladder by means of injection. This gentleman appears to succeed in obviating those disadvantages to which I have alluded at p. 614. I shall make the statement of his method in his own words.

“ Urinary calculi, with few exceptions, are soluble in very weak menstrua; and the lithic species, which is the most common, is dissolved slowly even by pure water. M. Fourcroy first remarked, that water, so slightly impregnated with the fixed alkalies as that it might be

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\* For much valuable information, both theoretical and practical, I refer the reader to Dr. Prout's excellent Treatise on Calculous Diseases.



swallowed, dissolved, in a few days, pieces of lithic calculi thrown into it; and that stones, consisting of the earthy phosphates, were still more quickly acted upon by as weak a menstruum of nitric or muriatic acid.

“The inner coat of the bladder, like the other mucous membranes intended to bear various irritations, has the power of defending itself to a certain degree against them, by secreting a mucus from its surface; and although it may not equal the intestinal canal in this respect, still it may resist sufficiently to permit the gradual solution of a stone in it by injection.

“Dr. Marcet lately, in a case of stone at Guy’s Hospital, prescribed injections of so strong a mixture as 23 drops of muriatic acid in 4 oz. of water, which was retained in the bladder for an hour without inconvenience.

“Habit might increase this power of the bladder, in somewhat the same manner as we see the urethra (which is a continuation of the membrane of the bladder) at first extremely irritated by the simple passing of an instrument, but soon allowing the constant presence of a catheter without inconvenience.

“The method of injection adopted in the few trials to dissolve stone, which were made by Fourcroy, Vauquelin, and others, was very objectionable, and was perhaps sufficient, without any error in the principle, to prevent success. This method was, to inject a quantity of the solvent, and to leave it until the bladder was excited by it and the accumulating urine to contraction; and to repeat the operation as often as circumstances would allow, with a menstruum as strong as could safely be borne. Now a considerable quantity being here injected at once, it soon becomes, by the addition of the secreted urine, so bulky as to excite the bladder to expel it, and thus, not only is the solvent retained but for a short time,

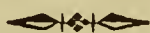
but the bladder is irritated by the action thus induced. By the distention of the bladder, a larger surface than desirable is exposed to the solvent, and the coat of protecting mucus is thinner as the surface is more extended; and the urine mixing with the injection dilutes, and may neutralize it.

“The following mode of injection is unattended with the above defects. It is by a double catheter, that is, a catheter with two channels, through one of which the solvent may constantly be running in, while by the other it is returning with what it can dissolve of the stone, and with the urine. The bladder is thus left at rest during the operation for any length of time, contracted to the degree desired, and therefore with little surface exposed to the solvent. The operation when once commenced goes on of itself, instead of being a troublesome interrupted one like the other; and the urine escaping immediately on reaching the bladder, can scarcely cause alteration of the solvent.

“The solution of stone in the bladder must, however, under any circumstances, be a process of considerable duration.”

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## OF PROPHYLACTIC REGIMEN.



I HAVE to consider the present very interesting subject in the following several points of view; namely, as it relates to the gout; to gravel; and to the morbid states of the digestive organs in general.

The means of preventing the return of gout, are in general more easily pointed out than practised; so great is the force of established habits, and so irresistible is the love of indulgence. In truth, however, it does not appear to me that gouty persons should be bound down to any rules of living which can be considered painful, provided they exercise a little philosophy; or that they should be obliged to use any care, which a slight perseverance may not render agreeable. Indeed the real comfort, as well as benefit, which follows the observance of such wholesome restraints in diet, as the particular constitution of each individual patient may require, very largely exceeds the transient pleasure of any sensual gratification afforded to the palate.

The discussion of the present important consideration may be divided into what relates to the general management; the diet; and the occasional use of medicine.

I may first observe that the views of *prophylaxis* are both prospective and retrospective; and those who may be led to expect the gout by inheritance, cannot too early be taught to pay the most careful regard to their constitution; nor too surely confirm the best habits by long practice\*.

It is true that the complaint sometimes wholly passes over a generation, but no confidence should be placed in such an exception. Prudence is the deity which will give safety. *Nullum numen abest, si sit prudentia.*

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\* The little Treatise of Lewis Cornaro, on the sure methods to attain a long and healthful life, is well deserving the reader's best attention. He emphatically exclaims, "Oh, what a difference there is between a regular and irregular life! One gives longevity and health, the other produces diseases and untimely death."



When the disease has made its invasion, the permanent cure rests indeed with the patient alone: and if he be wisely his own physician, before its tyranny be established, future prevention will be in a great measure at his command.

I know no rule more important to be mentioned, than that the patient, who finds out by sad experience his weakest points of attack, and the peculiar influence of particular remote causes, should guard himself against them with a nurse's eye, and with corresponding care. Thus some, from exposure to wet and cold, incur either certain gout or rheumatism; while others, although very gouty subjects, can take such liberties with impunity. I have met with two gouty persons in particular, who can actually remain in wet clothes without any consequent injury; but if they commit any remarkable excess at the table, an attack of gout almost with certainty follows. Such extreme instances are rare; but there is good ground for the general assertion, that every gouty patient is rather more susceptible to some one remote cause than another: and although he cannot be too much a practical philosopher in his whole conduct, he should be scrupulously vigilant against the enemy in his most vulnerable quarter.

It is curious to consider how completely the constitution changes in its powers and susceptibility, in passing from youth to manhood. I have known several instances, in which, the invalid now the subject of gout and rheumatism, traces back the period when he could bear any kind of exposure to wet and cold without any injury, having as a common practice, forded streams, and remained a long time standing in water, when pursuing the amusement of fishing.

When the residence is a matter of convenient choice, a gravelly soil on a middling level, and protected from the north and the east wind, should be selected for the purpose. A situation which is damp and cold, or even damp and warm, is much to be condemned. For those who are not yet rendered delicate and enervated by the long influence of the disease, I would be disposed to prefer the bracing quality of a cold dry climate, to the relaxing powers of one that is hot. It must at the same time be stated, that those who are tender feel enjoyment only in summer months, and some even obtain exemption from their gout by removing to a hot climate. Van Swieten, Haller, and other authors, relate some instances of extraordinary cure produced by such emigration. I have met with some gouty persons, who found themselves free from the disease during their residence in the East Indies, where business had taken them, although their habits were not more moderate than before. This seems to admit of explanation, from the profuse perspirations which regularly occur in such situations, and which obviously counteract the plethoric state of habit\*. For this reason chiefly, I presume it is, that the gout does not often make its first invasion in a hot climate, even with those who live freely. We also find that some robust persons of a sanguineous temperament, who are not subject to gout, in returning from a hot climate in which they enjoyed their health, to the variable one of

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\* I do not find that gouty persons are particularly liable to deficiency of perspiration. The contrary indeed happens with the majority, as they belong to the class of the *corpulent*; with whom, exercise produces a very free action of the skin.



this country, acquire an inflammatory disposition of vessels; and the explanation of the fact has already been offered.

Further, I may mention, that the benefit of equal temperature is most sensibly felt by gouty persons. Thus I have known of some who have quitted this country for India, with a gouty and rheumatic state of pain and infirmity, afflicting them upon their embarkation and afterwards; but no sooner have they arrived in a warm latitude, than ease has returned; and gradually their natural recovery has taken place. I must, however, observe, that no climate nor place of residence can give protection against the effects of improper habits of living. I know some gentlemen who experienced their first attack of gout when in India, and many others who have continued to suffer from gout in a warm climate, having been inattentive to their habits of living.

When we consider that vicissitude of temperature, or, in other words, wet and cold, is the most frequent of all the exciting causes of gout, it is incumbent on us to consider the best means of lessening the susceptibility of the body to the impressions produced by such means. During eight months of the year in this climate, the utility of wearing flannel next to the skin is too well known to require comment; and whether it should be discontinued in the warmer four months, must always be a matter of careful consideration. Even a leather waistcoat, over a thin one of flannel, is advisable in those instances in which the susceptibility to the influence of damp and cold is so remarkable, that more or less of rheumatism or gouty sensation follows from every slight accidental exposure.

Some persons feel as much inconvenience from a very humid state of atmosphere, as if they got actually wet



clothes. Every gouty patient should keep in mind, the infinite importance of preserving the feet *always* dry, and comfortably warm. I know many persons who state, that they are more apt to contract a fit of gout from getting wet feet, than from any other cause; but while this caution is observed, the debilitating influence of very warm stockings should be avoided. Upon the employment of cold sea bathing as a remedy to strengthen the frame, I can only recommend a general rule of caution, it being a very doubtful measure for a gouty subject; and the cold fresh water bath should be considered as almost inadmissible. The temperate bath of the Buxton temperature (82°) will be found most advantageous, both to strengthen the constitution and the limbs.

From well established experience, I can confidently advise, as equally safe and useful, the following daily practice; on which, indeed, although I have already spoken, I shall now dwell more at length. Sponge every morning the whole of the feet, between the toes, all around the ankle joints (and the knee joints also, if they have been the seat of complaint), with salt water, or water in which salt is dissolved to the point of saturation\*; care being taken, that the *chill* of the fluid be

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\* The most convenient method which I can recommend, is, that a large covered vessel should be kept in the chamber, containing bay salt and water; and it is only necessary to notice, that the salt is always in excess; which may be concluded when any appears at the bottom undissolved. A gallon of cold soft water dissolves three pounds of salt. From Summers, the ironmonger, No. 105, New Bond Street, a foot tub, conveniently constructed for the purpose of sponging the feet may be procured. It is convenient to rest the foot on the flat bar of this vessel, so that the used water passes into it.

always just removed by the addition of a sufficient proportion of boiling or very hot water. It will allow of this dilution, and those, whose skin is very susceptible, will find it necessary to add an equal quantity of the simple hot water.

The skin being wiped perfectly dry, and then lightly dusted over with hair powder by means of a powder puff, diligent hand-rubbing (the best kind of flesh brush) should be employed for as long a time as is convenient; and should invariably be continued until a sensible glow of the skin is produced. In the whole process one part should be finished before another is begun, lest evaporation should take place from the moistened surface in an unfavourable degree. In cold weather it is right to use a warm towel for the purpose of wiping the skin dry. It will sometimes be objected that this daily attention is too troublesome and tedious, and that the benefit, which it is likely to produce, is not worth the purchase. Such observations rest on the same weak basis, as those which apply to general care in regimen; and spring only from want of exertion, and the misapplication of time. The comfort of this cleanly custom is very great, and the assistance which it affords to the weakened parts, and to the proper functions of the skin, is of such importance, that I am persuaded its auxiliary power in the *prophylaxis* of gout is not inconsiderable. The numerous communications which I have received on this point are quite decisive in its favour. The subsequent friction\* of the parts pos-

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\* Sir William Temple, in speaking of the benefit of friction, strongly observes, "No man need have the gout who can keep a slave."

"Dessault cite un exemple connu à Bordeaux, d'un viellard centenaire, qui trente ans avant sa mort s'étoit garanti et guéri



sesses the obvious advantages of increasing the superficial circulation, and exciting the absorption of such deposits as previous inflammation has produced, either in the textures serving to motion, or in the cellular membrane. In proportion as the energy and strength of the limbs are preserved, the patient not only obtains the power of using regular exercise, but also fortifies the parts very usefully against future disease. By familiarizing the surface to the moderately cool temperature which I have mentioned, the susceptibility even of the whole body to atmospherical changes is in a considerable degree lessened.

With reference further to this latter important object, I recommend the patient to wash the whole head every morning, by means of a coarse towel dipped in water perfectly cold; using afterwards dry friction with the towel for a sufficient time. I have for a long time witnessed the advantages of this custom, without knowing a single instance of inconvenience resulting from it.

The powerful effect of *indolence*, in assisting the first invasion and all the returns of gout, brings us to reflect on the great value of regular exercise among the remedies of prevention. It is the injudicious practice of some persons, to mix indolence with exertion, by being inactive at home during the greater part of the week, and taking excessive exercise on occasional days. I know some gouty sportsmen who exemplify this statement very strongly, in performing even feats of riding at particular periods, but are sedentary in their general way of occu-

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de la goutte, à laquelle il étoit fort sujet auparavant, en se faisant broser et frotter chaque jour, soir et matin, avec une main garnie d'une mitaine de laine."—Barthez, tom. i. 194.



pation. In this manner a state of exhaustion rather than wholesome fatigue is produced ; and when by accidental excess in walking, more particularly, the weakened joints are thus *over-exerted*, the intended benefit is sometimes converted into an exciting cause of a paroxysm.

Horse and foot exercise should each be used as answering different intentions. These means of health, so useful to all persons, are of particular importance to the gouty, with whom repletion is so great a part of their disease.

Sydenham expresses himself very forcibly in these words, after speaking of horse exercise:—" And indeed I have often thought if a person was possessed of as effectual a remedy as exercise is, in this and most *chronic* diseases, and had the art likewise of concealing it, he might easily raise a considerable fortune."

The shaking exercise of riding on horseback appears well calculated to quicken the mesenteric circulation; to increase the gravitation of the contents of the alimentary canal; and to urge the peristaltic motion. It is a familiar fact, that active exercise of this kind is a speedy remedy for a fit of the *piles*, when unattended with inflammation.

Those persons, and especially the elderly, who have a weak and languid circulation in the extremities, should be attentive, when using horse exercise in the cold season of the year, to clothe their limbs with great care.

It certainly does happen that some individuals find horse exercise disagree, in producing unpleasant fatigue and lassitude; but it much more commonly happens, that it seems to contribute the very means of health. I know some gentlemen who chiefly succeed in averting the returns of gout by daily active horse exercise.

The additional advantages of walking exercise are made

apparent, in the consequent improvement of strength and motion afforded to the lower limbs.

Such as are crippled, and disqualified from the modes of exercise already mentioned, should daily take an airing in a carriage; but it is only some real necessity of this kind\*, or the obstacle of bad weather, that should give it more than occasional preference. Those who court indulgence must not expect exemption from the gout. In some instances of martyrdom from the disease†, a sudden adversity has proved a piece of good fortune! Even the influence of bad habits of living is exceedingly counteracted by active exercise and labour. The gout very rarely visits the poor man's cottage.

Many examples might be quoted, illustrating how effectually the predisposition to gout has been restrained, by taking a timely warning, and adopting an active course of life, with every observance of careful habits.

The superior advantage of the fresh air of the country over the confined atmosphere of the metropolis, is on all occasions sensibly felt by the invalid; and is no less calculated to preserve than to restore health. The gouty citizens of London should be studious to unite daily exercise in the country, with their less salutary pursuits in town.

The hours of rest and of rising deserve an attention of which the gouty class of society are too often unmind-

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\* On the useful influence of various modes of gestation, and the reasons for which carriage exercise is sometimes to be preferred, see Dr. Wollaston's interesting Essay, *Phil. Trans.* 1810, Part I.

† Van Swieten's Commentaries, § 1255, and Hoffman's *Rat. Syst. Med.* vol. v. 518.



ful; but their error consists rather in taking too much repose than too little. Neither more nor less than eight hours in bed, I should offer as the best general rule; and that the pillow should be sought before twelve, and quitted before eight.

In how great a degree health of mind belongs to health of body, I need not argue. The union of these blessings was the poet's warmest prayer:

“Orandum est, ut sit mens sano in corpore sano.”

The physical rules of health belong also to the moral code; and serenity and cheerfulness come as uninvited guests, where health presides.

As far as concerns the intellectual faculties, it must be stated that very sedentary habits of application, and long-continued intense thinking, are highly unfavourable with relation to the gout. I am acquainted with a gouty gentleman, who was formerly a London accomptant; and he relates that his severest fits were always induced by occasional excess of application to his business. Some who have retired from the occupations of the town to a country life, have lost their gout with a total change of situation and habits; and all receive benefit by such a removal. The rational and active exercise of the faculties is as much to be recommended as that of the body; and the proper rule consists only in avoiding excess of study. Sydenham, in the prefatory epistle to his *Treatise*, declares, “that his immoderate application to his work occasioned the severest fit of gout which he ever had;” and apologizes for having confined himself at the time to the subjects of gout and dropsy; adding, “that the gout constantly returned, as often as he attempted to go on with his work.”



I shall now attempt to offer a short treatise on the most favourable system of diet.

As, in the acquired disposition to gout, excess in diet is the indispensable remote cause, and, even in the hereditary disposition, is more or less the necessary antecedent to its developement, it follows that this part of my subject is of the highest importance to be considered. A few prefatory remarks may be useful by way of introduction.

The first change which the food undergoes, takes place in mastication. It is thus broken down, and becoming mixed with the saliva, the influence of which secretion is considerable, is prepared to receive the solvent action of the gastric juice in the stomach. I shall not enter into any physiological explanation of the structure and economy of the stomach, fearing to perplex the general reader, for whom in particular these observations are chiefly intended; but shall briefly state, that the food, after its sufficient preparation in the stomach, passes into the duodenum, which is the first of the bowels. There it receives the influence of the bile, and of the secretion formed by the pancreas; becomes more fluid, and also undergoes an important chemical change. In its progress through the alimentary canal, it becomes at every stage more and more altered; and, being at last separated from that which is to be the refuse, is brought into the state of chyle, that white nutritious fluid which is the antecedent condition to blood itself. This chyle being taken up from the upper bowels by the absorbent vessels, is transmitted through glands termed the mesenteric; and, finally entering the circulation, forms a component part of the blood.

In the most natural condition of life, or that which is the least civilized, the stomach shews its powers of accommodation in a remarkable manner, by digesting,

commonly without inconvenience, the coarsest and most unwholesome kinds of food. In proportion as luxury renders man effeminate, it requires from him nicer rules of management in diet, clothing, and general care. When we reflect duly on the subject, our surprise is not that rules of diet should be necessary for the preservation of health, but that the stomach should permit, without apparent injury, the violence which we offer it in our common habits, and the irregular action which we force it to undergo in the daily errors which we commit in the quantity and quality of our food.

The vigour of early life allows many liberties of this kind with seeming impunity; but the period of inconvenience and suffering will arrive; and I shall presently submit to the attention of the reader those rules which I conceive best adapted to preserve the stomach in health, and to contribute also to the regularity of the general functions of the body.

It appears to me, that a general rule of abstinence has been too much insisted upon, for the gouty; and that little is often performed, because too much is required. I am convinced, from long observation, that the security of the gouty does not, except in particular cases, require their being restrained from such a portion of the good things of the table as affords the truest enjoyment. With regard to the solid articles of food, it may be said, in general terms, that the choice should be of such as agree best with the individual. *Quod sapit, nutrit*, is an axiom of much truth; yet its use requires limitation.

The individual whose sole complaint is dyspepsia or indigestion, very readily discovers the consequences of improper diet in the immediate effects produced on the stomach; but the gouty patient, on the contrary, in the most frequent instances, is not inconvenienced by the first



symptoms of indigestion—is not aware, indeed, of any fault in his digestion, because the unhealthy process takes place below the stomach, and in the duodenum, I believe, principally, where the process of digestion preparatory to assimilation appears to be most actively carried on. The stomach itself very often does too much duty, by preparing more food than can be afterwards properly separated and assimilated; and it follows, either that repletion of the bowels and an overcharged state of the vessels of the liver are produced; or, if the whole quantity of nourishment be assimilated and converted into blood, a plethora of the system is the consequence. More commonly both these results take place.

The mind is unconscious of the disordered functions of secretion which thus arise in the advanced process of digestion; and the patient not finding any sense of oppression or indigestion in the stomach itself, feels satisfied and convinced that his food must have been wholesome, and suitable to his constitution.

An exact rule of diet for general application can scarcely be offered; for in some idiosyncrasies, the most wholesome food proves the most injurious. Dr. Spurzheim informs me, that his coadjutor, Dr. Gall, cannot ever partake of *mutton*, in whatever manner it may be dressed, without immediately suffering irritation in his stomach in a most severe degree; and the same effect has with certainty followed, when the dish has been purposely disguised by his friends.

I might mention many other extraordinary instances of individual peculiarity, with respect to those simple articles which agree so well with persons in general. The succeeding observations have a general application to the health of invalids, for whom attentive regimen is necessary, whatever their chronic disease may be.



I shall probably make myself more clearly understood in the rules which I am about to suggest, by treating of the several meals of the day under their respective heads.

*Breakfast.*—The dyspeptic patient may require more than usual nourishment at this his first meal, from the languid and weak state of his stomach, and from general debility. In this case he will do right either to take cocoa or chocolate instead of tea, with toasted bread, and butter of the best quality spread on cold, in moderation; or plain rusks; or if the above articles do not agree, he may take black tea with sugar, and milk and cream mixed, rather than with cream alone. For those to whom very moderate diet is necessary, bread is sufficient; others, who require more support, may take, with benefit, a *new-laid* egg, lightly boiled (from 3 minutes to  $3\frac{1}{2}$ ); and those, whose constitutional powers are feeble, but yet have appetite and tolerable digestion, may, with almost certain benefit, take one or two thin mutton chops, carefully dressed, and having the fat and skin quite removed: with this, dry bread should be eaten; or if with butter, it must be used sparingly.

*Luncheon.*—Except in cases of much constitutional relaxation, or for those who dine at a late hour, the refreshment taken in the middle of the day should be of the lightest kind, as two or three biscuits of the best quality, or a plain cake made with the addition of caraway seeds, or some bread and butter, drinking a little milk and water, with a little sugar and grated nutmeg. Sometimes a small basin of beef tea and bread, or of gravy soup, is an eligible kind of support. In other instances, a small portion of cold meat or chicken is to be allowed, with a little wine and water if ne-

cessary, or some soda water, or common water. The use of wine at this period of the day should be avoided, unless the constitution is languid and enfeebled. It is by no means necessary that any drink should be taken at this time; and certainly, if taken, it should be in small quantity. In the summer season, some fruit, with exceptions afterwards to be stated, eaten with biscuit, is equally grateful and wholesome.

Those who have a very weak stomach, or who labour under constitutional debility, would be materially injured by long fasting, or passing more than four or five hours before the dinner meal without some nutritive refreshment; but all persons should be careful not to pass more than five or six, or at the most seven hours, between breakfast and dinner, without some slight food.

For persons subject to gout, I would, with occasional exceptions, disapprove a luncheon of animal food, and particularly the use of wine at this hour, except under circumstances of great bodily exertion. At the time that the mind is much employed, it is very injudicious to engage the stomach considerably in the office of digestion. This fact is so well known by literary men, and by senators, that sometimes they are more disposed to pass through the twenty-four hours with tea and bread and butter, for their support, than to take a regular meal. Some little nourishment, however, is useful in all instances between breakfast and dinner, unless the interval be very short; on the principle of giving occupation to the gastric juice, and preventing the stomach from going too much into a state of contraction. Also, if real emptiness be long permitted, a depression of the general nervous energy is frequently the consequence.

*Dinner.*—Upon the due management of this, the



grand meal of the twenty-four hours, the welfare of the stomach and the general constitution materially depends. It is here that the evils of indigestion, with gout, as one of its consequences, are created. The foundation of gout is usually laid in the early part of life, when in the gay strength of youth we bid defiance to disease. Those therefore who have any expectation of the gout by inheritance, should be careful in their early habits of living; for reformation sometimes comes too late to repair completely the mischief which has been produced. The care necessary at the table relates to quantity and quality, and to quantity most especially. I have already said, the patient with simple dyspepsia is almost prevented from committing an error of this kind, on account of the immediate uneasiness, pain, or sense of oppression, which he suffers from too full a meal; but a gouty person for the most part, and especially in the first years of gout, possesses not only a good appetite, but strong powers of stomach; and it is mostly below the stomach, that the fault of his digestion takes place. Thus it is frequently, that in the seeming possession of the best health, a severe fit of gout makes its invasion. I say seeming health, for it cannot be real health, when so painful and tedious a disease is regularly, although insidiously, taking place. Upon a review of all the circumstances of the constitution, we commonly find that there has been a gradual increase of bulk in the abdomen, a more than usual fulness of the veins perceptible in the upper and lower extremities; a sense of fulness, as it is commonly expressed, in the head; and, as the disorder approaches, a torpor of the bowels and a deficient action of the kidneys also occur. If a patient were really mindful of all these circumstances, and would adopt a consequent abstinence in diet, and have recourse to proper medicine, he might, in all pro-



bability prevent the fit of gout. I must now return from this digression, and enter on the plain rules of eating and drinking at dinner.

The advantage of dining at an hour not later than four in the day, is very well known ; but with this salutary custom, the rules of fashionable life are wholly at variance.

The use of soups cannot be too sparing. Those who are corpulent and have much fulness of habit, should avoid them entirely. Well-made gravy soup is the most wholesome; and even this should be taken only in small quantity. It is very injudicious to begin dinner by distending the stomach with fluid. Of fish, salmon should be avoided by dyspeptic persons; and even those who are not to be restrained by the most rigid rules, should refrain from the fat part of this fish. The salmon peel (or young salmon) is the least objectionable. Lobsters to be forbidden in every way. Stewed fish of all kinds not permitted. Dyspeptic persons should avoid eels and mackarel. Oysters are rather treacherous for the gouty, as being so very nutritive; but they are proper for the dyspeptic, the beard part being removed, and they appear to be most wholesome boiled in the shell. Boiled fish are more correct than fried; or if the latter be eaten, the fried skin should be removed. Shrimp sauce, or a little melted butter, with the addition of soy, used in moderation, by way of sauce, may be allowed. Of the meats, veal seldom agrees with the dyspeptic stomach, but best when boiled, and when minced; but with some individuals, veal in any way disagrees;\* and it may be

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\* It appears to me, that the skin and cellular part of meat are more favourably prepared for the agency of the gastric juice (to express myself familiarly, are rendered more fit for digestion)

stated to be the least digestible of the meats in general; and this fact is referrable to a principle which I think may be laid down, that animals such as sheep and game, which are allowed to range in fields, acquire much muscle and little fat in proportion, while the reverse of this takes place in stall-fed cattle, which are much covered with cellular texture and fat, instead of the more useful material, muscular fibre. When the animal is not too aged, it is the muscular fibre that affords the best stimulus to the stomach, and the most favourable substance for digestion. Salt meat should be remarkably tender in order to be allowed. Mutton is unquestionably the most wholesome of all meat. Pork, spoken of in general terms, is improper; yet it may be observed of roast pork, that if the fat part be wholly avoided, it is very light and of easy digestion; and a boiled leg of pork, when very tender, is not objectionable. I learn, however, from good authority, that pork broth (quite freed from fat) agrees remarkably well with very weak stomachs. A well-cured ham, so that the fat part be almost avoided, is an indulgence which usually agrees with the stomach, taken in moderation. Tongue appears to be less suitable to weak powers of digestion, and answers best when cold. With regard to roast sirloin of beef, in every

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by the influence of the boiling process; but, on the contrary, that muscular parts are rendered comparatively more loose in their texture by means of roasting. As illustrations of the probability of this reasoning, I may mention the articles, calf's foot, and veal, to exemplify the first position; and the second is instanced by the superior tenderness of beef moderately roasted, over that which has long been submitted to the boiling temperature.



sense of the word so good a dish, I would desire the following caution. The inside, as it is called, although the most tender, very often oppresses the stomach, when the more muscular (the upper) part of the joint will not have that effect. When the stomach is delicate, the fat should be entirely avoided. Indeed the fat and skin of all meat should be held objectionable; but the fat of venison is the most easily digested. Poultry ranks first in the articles of proper food. The rabbit is also proper. Made dishes are, with very little exception, to be excluded from the critical plan of diet. Venison and game may be considered the food of all others the most easily digested, and unquestionably proper when fever is not present, or when the stomach is not in too excitable a state; but game should never be eaten when high, as being then so very stimulating. The above restriction in regard to the state of the stomach, applies particularly to the use of hare, the muscular parts of pheasant, and woodcock. Although game may be more easily digested than boiled chicken, for example, yet it is more stimulating; and this is a distinction to be kept in view. Rich sauces are obviously improper. All hashed dishes are less wholesome than in the first state of cookery, with the exception of veal boiled and minced. Pigeons may be spoken of as being heating food, and not wholesome. Pickles, and more especially new pickles, and all raw vegetables, are improper for dyspeptic persons, and those subject to gout would do well for the most part to refrain from them; and, when on strict regimen, must be required to observe this prohibition. Any vegetable well boiled and quite in season, with the exception of spinage which I conceive to be very fermentable, renders the dinner more wholesome than the sole use of animal food.



In some instances, however, of such great debility of the stomach, that a very moderate meal produces an oppressive state of distention, apparently from causing fermentation, it proves useful to the patient to abstain wholly from vegetables. The nature of the animal food should also be attentively considered. There are certain grounds of observation, upon which a medical judgment may be formed, to determine whether the diet in particular cases shall consist most of animal or vegetable food. These grounds are, the kind of fermentation in the alimentary canal, as whether the putrefactive or acetous; and the nature of the various secretions.

A moderate portion of the stimulus of pepper and mustard, when relished with the article eaten, is advisable, under the circumstances of languid digestion; but certainly, the habitual free use of condiments should be guarded against: they are not necessary to a healthy stomach. Salt is a stimulus which we may be said naturally to require in union with food; yet it should be taken in moderation, on account of the thirst which it excites, and the distention of the stomach and bowels consequent upon an excess of fluid.

All vegetables, with the exception of potatoes, are best when young, and some only proper when tender in their early growth. The difference between young and old peas, or young and old carrots, is very obvious; as between greens when quite sweet, and when old and watery. The potatoe in its mealy state is the most wholesome. When roasted, it appears to be critically the best; but if boiled, should always be well steamed. Mashed with milk and a small portion only of good butter, it usually suits the stomach; and this is generally considered the most pleasant mode of dressing this excellent

vegetable. To add to the list of proper vegetables, I may mention celery stewed in milk.

In other instances, the diet technically called milk and vegetable, is to be recommended, in order to counteract an established plethora or overcharged state of the system. This, however, is only a provisional plan, adapted to temporary circumstances.

I need hardly remark, that new bread is very improper. When acidity of stomach prevails very much, all bread should be avoided, and biscuits of the best manufacture be eaten instead.

I have further to observe of bread, that those persons who are subject to habitual costiveness, will find great advantage in shunning the astringent white bread of the baker, and in taking brown bread made with flour from which the coarsest part of the bran only has been removed. I am acquainted with many examples in proof of the utility of attending to this apparently trifling change in the plan of diet.

Rich pastry and most confectionary must be placed in the forbidden list. Pie-crust is certainly unwholesome. In the summer season, when the palate is tempted by fruit, it is admissible either baked or boiled, mixed with baked or boiled rice. The rice very usefully qualifies the action of the fruit. All puddings of the farinaceous kind are wholesome, as rice, sago, bread, &c. and an apple pudding is proper. Jelly and blanc-mange are permitted delicacies. Cheese, so that it is neither new nor very old, may be considered as proper in small quantity. It is said of cheese that it has the quality of digesting every thing but itself.

The observations which I have at present offered, relate only to the quality of diet; but it is of infinite



importance that quantity should be considered. An accidental indigestion from some particular article of food may often cure itself; but the consequences of habitual error in quantity are of a much more permanent nature. The stomach would in most instances be less incommoded by a small quantity even of unwholesome food, than by a very large quantity of that which is in its quality very proper. My meaning in this argument will be obvious, and I require an attention to both points. The temptations of a table abundantly and luxuriously spread, are such, that a constant attentive recollection and forbearance become absolutely necessary to ensure security from harm. But it is equally certain that care and moderation in the indulgence of appetite procure a much greater share of comfort and real enjoyment, than the transient gratification of an entertainment can ever afford.

Simplicity of diet, therefore, consists principally in the small *number* of the articles to be eaten at the same meal. By the virtuous observance of this rule, the appetite will seldom urge the taking of more than what is useful; and the stomach will be sufficiently spared, both in its secreting and muscular functions. Also the subsequent process of assimilation will be more easily and perfectly performed in all its stages; and unhealthy corpulency, and a radical disposition to the true plethoric state, will be obviated.

No exact rule of quantity can possibly be laid down; and I will not require a measure of ounces, though such a regulation is really sometimes necessary; but, as a general direction, I would suggest that it is unwise in any one to whom rules of diet are necessary, to partake of more than one dish of animal food after fish on any occasion, and this may consist of meat, or poultry, or game.



If fish be omitted, a little more latitude may be allowed in the other dishes; and this plan would comprise two slices of meat, and a little poultry or game. If I say that some gravy soup may precede these dishes, and some pudding follow, I surely shall not be thought rigid in considering this as a maximum quantity for dinner. The dyspeptic patient, with a very weak state of stomach, will find it necessary to confine himself to one dish besides fish, or perhaps to one article exclusively, quite omitting soup. Although the taking of a quantity of food, however small, which is sufficient to produce a sense of weight and oppression at the stomach, is a proof of excess; it by no means follows that a large meal, if it do not cause any such sensations, is within proper limits; for, doubtless, it is in this insidious way that plethora is produced. Turtle and venison are so readily digested, that the error in question would be a certain consequence of quantity, if much continued. The diligent mastication of the food and slow eating, are further points very much demanding consideration, on the principle explained at page 648.

The use of fluid with dinner is required for two purposes, as a diluent and a stimulant. Most persons take an excess of beverage, distending the stomach unfavourably; rendering its contents too thin; and perhaps causing a dilution of the gastric juice, which may tend to weaken its digestive power. For the purpose of dilution, water is the most useful drink, taken as water simply, toast and water, or soda water. For a dyspeptic state of stomach, I advise a half-pint bottle of soda water (the sort which has the medium proportion of carbonate of soda, called *double*) with the addition of a wine glass of sherry, to be taken as drink at intervals during dinner. The cork should be drawn a short time previously, so

that the excess of fixed air may be allowed to pass off by standing. Sufficient carbonic acid remains incorporated with the water: the excess causes too much distention. With the majority of persons, half a pint of beverage with dinner, will, by acquired habit, prove sufficient; and in no case should the total quantity exceed three quarters of a pint.

Against strong *malt liquors*, the objections are very numerous. Ale and porter, from their superior nutritive properties, tend very much to produce the plethoric state of system, and must therefore have a strong influence in promoting the predisposition to gout; so that in the dietetic plan of those who take wine, the use of these liquors should not be permitted. Small beer of good quality, and free from all acidity; or, in the technical expression, not in any degree *hard*, is a wholesome beverage; and although less salutary than water, it need not be altogether denied, except to the corpulent and plethoric; and provided that dyspepsia is not present. I must however observe, that a person subject to gout should confine himself to the quantity of a quarter of a pint, as an indulgence with cheese. I disapprove the use of perry, cider, and spruce beer.

Two small glasses of wine, either of old sherry or sound Madeira, with dinner, may be stated as the full quantity which can be useful as stimulant to digestion. Those who truly consult their health will avoid the wines imported from the continent\*. The least improper of them are old sound hock, white hermitage, and good sauterne. The gouty patient should shun champagne, or take it

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\* Dyspeptic persons who travel on the continent, usually find advantage from taking weak brandy and water instead of wine.



with distrust, not going beyond the first glass. Some take up the argument, that as gout does not prevail in the country where the wine is made, it cannot have a tendency to promote gout. Now it should be considered that our climate is very different; that the skin does not throw off so much as in the warmer country; and that with the taking of champagne, we have associated at our table much general conviviality and excess during and after dinner. Of its positive agency in promoting gouty disposition, and often exciting immediate gout, I see too many proofs to leave me in any possible doubt on the subject.

Thus far, then, as to the quantity of the chief meal of the day; in addition to which, the other meals should only be considered as accessory refreshments. How much is the plan of temperance or moderation which should be pursued, reversed by the practice of the majority; and more especially by the votaries of fashionable life! With those whose breakfast, and luncheon, and dinner, and sometimes even supper, consist of animal food, with corresponding liquors, having more or less of heating stimulus, must it not follow, that the gout or some other disease will be induced? It will occur indeed as an effort of Nature to interrupt the destructive process, and accomplish the reduction of the system by means of pain, and the effects consequent on pain.

Those who disregard all rules of temperance, can neither receive nor deserve a cure from the physician.

I proceed now to make some further observations on the use of wine by gouty persons.

I have already dwelt (p. 71 and 109) at some length on the comparative influence of different fermented liquors; and return now to the position, that, with respect



to the gout, the quality and quantity of what is drunk is of still more importance than of what is eaten : but on this head, also, I have no restrictions to propose which are inconsistent with the true enjoyment of social life. As a general statement of the question, I would contend, that a small portion of wine after dinner is as useful and innocent for a gouty person as for any other. Some few, who are of a sanguineous temperament, and are much disposed to the inflammatory plethoric state, would be wise in shunning all fermented liquor, and adhering to the safe beverage of water ; provided that such a plan proves favourable to the nervous system ; but on the other hand, I am convinced that I offer a concession on the side of truth, in stating, that the gouty, for the most part, acquire, by that course of living which has brought on the disease, such a state of stomach as concurs with the influence of their temperament, in rendering the moderate use of wine both useful and necessary\*. It pro-

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\* I feel it important to explain my sentiments on this point without ambiguity. On reviewing the above doctrine, I am convinced of its correctness. It should be considered, that the particulars with regard to diet, which constitute a very material part of medical treatment, must be modified in relation to particular individuals, in the same way as medicine ; exercise ; or any other class of remedies. Every general rule of regimen must, in each separate instance, be varied in some of its circumstances. Such gouty persons, for instance, who are yet young and full of vigour, would wisely fulfil the object of prevention, by confining their beverage to water. The second class, whose strength has been impaired by the disease, may with benefit employ wine, under the limitations which I have expressed. The third class, whose constitution is become infirm and nervous from long and repeated attacks, *require* the cordial power

duces a comfortable feeling; and its beneficial effects, when it is used within the strict rules of propriety, are felt throughout the whole frame. I am disposed to consider, that taking less than three glasses is an unnecessary forbearance; and that taking beyond half a pint should be considered as the beginning of excess and injury. In determining the exact quantity most favourable to the individual patient, I may observe, that a truly careful attention to his own feelings would, for the most part, be a sufficient guide; the proper object being, that the wine should produce a feeling of comfort, without any sensible heating excitement.

After dinner, the limitation of wine is the chief point of important consideration. The dyspeptic patient will be taught by his feelings whether two or three glasses shall best agree; but the gouty patient must consider more attentively the principle of the plan: for the evil which he may suffer, arises from its ulterior effects. I repeat that, for the general rule, two glasses would be the most moderate quantity which I should require, and six the utmost that should be allowed, the medium rule being three glasses. Home-made wines are to be avoided. As a pure stomachic wine, I am persuaded that old genuine sherry is the kind to be preferred. I am led to consider, that sherry is less acescent than Madeira, from

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of a little good wine; and, with all other correct management united with such cautious indulgence, will, I am persuaded, improve the tone of their stomach and the energies of their general health, without aggravating the predisposition to gout.

The direction of a glass of wine as a measure is obviously indefinite, and I know not how to make my meaning clear, otherwise than by stating a glass to be equivalent in quantity to an ounce and a half.



a few trials which I have made with good specimens of each wine, as to the comparative proportion of an alkali which they have required, in order to be rendered neutral. Madeira, however, which is sound, is unexceptionable; and the same praise may be given to old genuine port, of moderate body. Some persons find themselves very inconveniently stimulated by port wine\*, and have sufficient reason to prefer claret. Sometimes I rather advise than forbid, after the two glasses of white wine, four or five of claret, stipulating however, that it shall be of the best quality. If one could suppose it necessary that a person should deviate from moderation, I would name perfectly sound claret, from its containing a smaller proportion of alcohol than the other wines, as the least injurious. In the proper rule of limitation, the more stomachic wines, are, for the most part, alone to be recommended. Red hermitage and Burgundy, the latter wine especially, may, figuratively, be said to contain gout in every glass.

*Dessert* is an indulgence so superfluous, that in dyspepsia it should be wholly avoided as injurious, and in no case should much be taken. For the dyspeptic, and here I would also include gouty persons, I must prohibit the following fruits entirely, conceiving that they have all a particular tendency, more or less, to produce acescency and fermentation—currants, gooseberries, plums of all kinds, melon, raw apples and pears. If I do make

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\* I know a lady who is invariably rendered immediately ill by the smallest quantity of port wine, although she drinks white wine with benefit. Her symptoms are an hysteric difficulty of breathing, extreme general nervousness, and head-ache.



an exception to this statement, it should be in favour of the nonesuch apple, and a ripe pear of fine quality. Of cherries, the best kind, ripe, may be eaten; but the superior sort only are allowable. As a rule, I advise that only two kinds of fruit be partaken of in any one day. With medicinal views, the middle of the day is the fittest time to be chosen for fruit; to be eaten with thin biscuits; and, still, moderation is to be observed. A small quantity of preserve, so that it is not of too luscious a kind, eaten with biscuit, may usually be granted as an indulgence after dinner.

Two moderate cups of black tea in the evening are proper: and tea with most persons proves no less refreshing than agreeable. Coffee is too stimulating for evening, if consequent to wine, unless the interval has been long from dinner, and that fatiguing exercise has been taken, in which case the choice of it or tea may be made. Coffee for breakfast is often useful as a preliminary to great bodily exertion, and with some individuals agrees materially better than tea. It is most wholesome with the addition of boiling milk. A few gouty persons have assured me of the prophylactic virtues of a cup of pure coffee (without its accompaniments of sugar, milk, or cream), taken in the morning fasting. I cannot think that it is calculated to improve the tone of the stomach.

The supper meal being one so obsolete, I need not enter a caveat against it; but as no rule exists without an exception, I must allow, with regard to refreshment at night, that to meet the effects of extraordinary exertion, or the fatigue and consequent exhaustion from dissipated hours, a small quantity of animal food, of the lightest kind, as chicken for example, will be useful and necessary, with a little wine. But this is the mention only of a remedy

for an error which should not, on the plan of *Hygeia*, be committed. Bodily exercise demands a larger share than usual of animal food ; but the reverse holds good with regard to the labours of the mind.

If any one by chance get wet, he should strictly guard against remaining in damp clothes without exercise ; and even with exercise it must always be hazardous. A gouty person should take religious care to avoid wet feet. When getting wet by accident, immediately on returning home, he should not only put on warm dry clothes, but all the damp or cold surface should be well rubbed with heated towels.

I have before observed that, in prosecuting the good rules of health, the hours of rest and rising deserve an attention which is too commonly neglected. The portion of sleep absolutely required varies very much in different constitutions ; but, as a general rule, I would state, that eight hours in bed is a sufficient time for all purposes of health. I ought to mention, that persons who suffer considerably from indigestion, and a weak state of the nerves of the stomach, will usually find it advantageous, and often indeed necessary, to take repose on the sofa after dinner, and a little sleep ; but they should be careful, speaking of this point in general terms, not to sleep more than half an hour ; for, certainly, protracted sleep at this time causes much more of languor and feeling of debility, than refreshment and comfort.

Some very interesting cases have come under my observation, in which, not only an abstinence from wine and every kind of fermented liquor has been steadily pursued for a great length of time, but even animal food has been entirely avoided ; with a view to prevent the returns of gout. The results of three experiments of this



description I have related at p. 342, 447, and 503, and I shall here offer a few additional facts.

C. R. aged 48, of vigorous constitution and rather plethoric, much subject to *hereditary* gout, discontinued the use of wine and all fermented liquors for eighteen months. He did not procure a longer interval from gout than usual, nor was the succeeding attack slighter. He felt his stomach so sensibly weakened, and his nerves so much depressed, in consequence of the plan, that he returned to the moderate use of wine ; and with equal comfort and advantage.

H. A. aged 54, slight in form, and not plethoric, subject to *hereditary* gout from the age of 24, abstained wholly from wine and all fermented liquors for fifteen months, also being very sparing in the use of meat. At the end of this period he was attacked with gout more severely than on any former occasion ; in a greater number of parts ; and the fit was longer than any which he had ever experienced.

J. K. aged 52, tall and slight, and not plethoric, subject to severe attacks of *acquired* gout since the age of 32, strictly discontinued the use of animal food, wine, and all fermented liquors, for the long period of four or five years. When two years of this probationary regimen had expired, he was attacked with gout most severely ; the fit proved of more than usual duration ; nor was there less inflammation of parts than on former occasions.

A lady, between 50 and 60 years of age, of the sanguineo-nervous temperament, much subject to gout, abstained wholly from wine and all fermented liquors, and even from meat, living wholly on vegetables and puddings. Her attacks of gout were not less frequent than before, and her nervous system was much de-



pressed. She resumed the use of animal food with advantage; but continued to abstain from wine and fermented liquors.

A gentleman, aged 42, having suffered from several fits of gout, and resolved to make any sacrifice of the ordinary pleasures of the table, in order to prevent the miseries of this disease, almost confined himself to a vegetable diet for six months, and scarcely ever took a single glass of wine. He found himself depressed and weak, and at the end of this experimental plan, a severe fit of gout took place.

I could, however, relate many other examples, in which the patient has given up the use of wine with much advantage, and certainly with the important result of greatly counteracting the return of gout. These individuals have chiefly been of the sanguineous temperament, and they have possessed great firmness of constitution.

The facts, therefore, which I have related, appear to me sufficient to shew, that the entire disuse of wine by a gouty patient does not carry with it the certain advantage of preventing the attacks of the disease, which some contend for; and I consider that in most instances it is not a safe measure to the powers of the constitution: but I wish it to be clearly understood, that while I advocate this doctrine, I only recommend the very moderate use of wine; under different degrees of restriction with different persons; and desire of all, without exception, an attention to every other point of regimen, as indispensable.

I must add, also, my entire acquiescence, that a suspension, for a time, of nutritive diet and of the use of wine, is capable, in some instances, of affording material benefit to the constitution. Indeed, in some cases of long-

established visceral obstruction and vitiated state of the alimentary secretions, both in gouty persons, and in others, I have found the happiest consequences to follow from the temporary adoption of a diet, consisting chiefly of milk, vegetables, and farinaceous food, in conjunction with a course of medicine; but such a plan has been provisional only, and with reference to existing disease; and is entirely to be distinguished from the regimen of a severe abstinence for life.

*Spirits*\*, however diluted, should be shunned as a certain enemy; and therefore never taken, except under the prescription of the physician, in order to answer some particular intention.

In directing my consideration to the most proper regimen for persons afflicted with gravel, I may make useful reference to my narrative at p. 608. The patient should be instructed to avoid all those causes which tend in any degree to produce acid fermentation in the stomach and alimentary canal. Thus, *hard* malt liquors, and especially of the stronger kind; cider; perry; spirits in every form; a diet too much vegetable to allow to the powers of the stomach and the general system the

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\* Although good wine contains so large a proportion of alcohol, as to amount generally to one-fourth, according to the experiments of Mr. Brande (Phil. Trans. 1811, Part II.); yet the spirit is in such a state of combination with several peculiar principles, that its influence on the stomach, when thus combined, is very different from that of raw spirits, mixed or unmixed; and more especially, in proportion as the wine has received its improvement from age, are its stimulating properties favourable, and less likely to be injurious.



natural support which is required ; are the causes of injury chiefly to be avoided. The labourer, upon whom the disease most frequently falls, must assist his strength with such malt liquor only as is entirely free from acidity ; and good porter appears to be the most useful. The affluent patient should confine himself to the moderate use of pure wine ; shunning all the kinds in which acid predominates. When medical treatment is required, the use of ass's milk is much to be recommended.

Another point, in particular connexion with the present subject, now presents itself.

In every age of the world, and in every medical writing upon regimen and diet, the qualities of water have been a favourite and just object of consideration. Nature does, indeed, present an astonishing diversity in the composition of her springs, derived from the strata through which they flow. The beautiful and important chemistry which is thus going on in the inmost recesses of the earth, and which furnishes to man, both for his uses in health, and for his occasion in sickness, the most salutary beverage, and often the most valuable medicine, is one of the innumerable wonders of the creation, which must raise our admiration and our gratitude to the supreme Author of every good !

The kinds of water which are chosen for our domestic use, are such as are the most grateful to the palate, and are divided into the *hard* and *soft*. This distinction has been deduced from the difficulty or facility with which the respective kind forms an admixture with soap. If difficult, the inference follows that much saline matter is contained ; which, attracting the alkali from the soap, leaves the oil detached, forming flakes or curds with the water. If, on the contrary, an easy *lather*, as it is called, take place, it indicates that the saline matter can be pre-



sent only in small portion; and the water, being free from other substances, is then denominated pure. The kind of water denominated hard has always been considered as unfriendly to health, and as specifically injurious to persons afflicted with gravel and stone. Many probably imagine, that the earthy salts which it contains assist in making up the mass of the calculous concretion. If we view the composition of water according to the general doctrine, it is curious to consider, that the only ingredients which it is found to contain of difficult solubility, are such as are seldom or never found in urinary concretions; namely, the sulphate and the carbonate of lime\*. Unless, therefore, they undergo decomposition in the alimentary canal, or in the circulation, this cannot be a mode in which they would become injurious. In the more rational theory, however, of the natural composition of water, as Dr. Murray has with so much originality and useful ingenuity suggested, the arrangement of the constituent elements appears, in the majority of cases, to be wholly different from that which is commonly conceived. According to the views of this chemist, the almost insoluble salts in question, the carbonate and the sulphate of lime, do not actually exist in the propor-

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\* Mr. Howship, in his "Practical Observations on the Diseases of the Urinary Organs," gives the following account of a very large renal calculus, which was in structure "compact and earthy, in consistence resembling bird-lime, and of a pale yellowish grey colour." By analysis, Mr. Brande found this matter to consist of carbonate of lime, mingled with an extremely tenacious animal matter. He observed, "that it was the first instance he had ever known of the kidney secreting the carbonate of lime."

tions which are usually stated, if at all ; but, on the contrary, their acids arrange themselves with other bases, so as to produce the salts which are soluble ; and hence the hardest waters cannot be supposed to possess the unwholesome qualities so freely assigned to them. It is not indeed probable that Nature would present to the hand of man, a fluid, which should be grateful to his palate, necessary to his wants, and at the same time injurious to his health.

I disbelieve the general opinion which is entertained of the hardness of water, as a common cause of gravel and stone ; and doubt not, that the true and principal explanation will always be found in the patient's unfavourable mode of living as to regimen and diet ; and in the use of liquors much less innocent than the water of the district, which so commonly receives the whole reproach.

Notwithstanding these remarks, I do, however, freely admit, that a water which is the most free from foreign ingredients, approaching to the state of *distilled*, is the most favourable diluent with our food ; the best solvent in the digestive process ; and better calculated to counteract indigestion, than a water strongly impregnated with earthy salts, whatever their state of combination may be. In this manner, then, I accommodate my reasoning to the facts which occasionally appear, that persons who suffer much from gravel are extremely sensible to the influence of particular waters which they drink ; and invariably declare that they suffer inconvenience from the use of those which are hard. This fact being admitted, the explanation, as I conceive, must be founded entirely on the sympathy before explained between the digestive organs and the kidneys : and hence,

whatever most conduces to the healthy process of digestion, harmonizes with the general feelings of the patient, and promotes every healthy function.

With respect to the use of medicine in the prophylactic treatment of gout, we are to be directed chiefly by the state of the alimentary canal and of the kidneys. The daily action of the bowels is of essential importance to every gouty person; and the degree in which this may be required, will have reference to the particular constitution of the individual. For the purpose in question, as well as on account of some useful influence it may have in exciting secretion both in the alimentary canal and in the kidneys, I can, from experience, recommend, for occasional use, the pill prepared according to the following formula :

Rx. Gum. gambog. gr. j.

Pilul. hydrarg, gr. v.

Pulv. aloës compos. gr. v. ad x.

Saponis duri gr. ij.

Decoct. aloës compos. q. s. fiant pilulæ iii. vel  
iv. hora somni sumendæ, alvo astricta, vel pro re  
nata.

The following is a pill of more simple composition, and adapted to familiar use in a still greater degree; viz. a dose of five or ten grains of the pulvis aloës compositus, half a grain or a grain of pulvis Jacobi, with a grain or two of sapon. dur. (to obviate the hardness of the pill, when kept in quantity for use) formed into two or three pills with the decoctum aloës compositum. For those who are corpulent, and readily disposed to become plethoric,



I should add to the dose half a grain or a grain of gum. gambog. that a greater diuretic effect may be produced.

It was the theory of the humoral pathologists, that in gout, as in several other diseases, the blood should occasionally be subjected to a regular course of purification, by means of vegetable medicines, consisting of various and opposite qualities intended to modify each other, so as to harmonize into one general purpose. Thus, Sydenham advised an electuary composed of thirty-one ingredients. He adds to his observations for its use; "But care must be taken to make choice of such simples as are most agreeable to the patient's palate, because it must be continued a long time, namely, for the most part of his life." He also recommended a dietetic decoction, consisting chiefly of sarsaparilla, which he desired to be begun immediately on the going off of the fit, and to be continued in the intervals, "during the remainder of life."

It is with much satisfaction I state, that many of my patients, accustomed to be attacked with gout severely at particular periods of the year, have pursued a moderate course of corrective and aperient medicine in union with regulated regimen, with such success, that they have entirely prevented the disorder from taking place; and have also derived very sensible benefit to their constitution.

In regard to the best means which we can employ to prevent the return of gout, it should fairly be considered that one cannot say to a patient, "You never shall have the gout again."—This would be tantamount to an assurance to any other person, "You never shall be ill again." As a general statement, it is true, that any remote cause of injury, such as indiscretion in living, exposure to wet and cold, violent passions of the mind, bodily injury, ex-

cessive fatigue, and so on, which in another individual not disposed to gout will usually produce some form of disease, accordingly as the predisposition may be, does, when applied to the gouty patient, bring into action the gout, and most frequently the gout alone.

Alkaline medicine has been often recommended in the gout upon chemical principles, in reference to the theory of uric acid being the proximate cause of the disease. Dr. Wollaston, in describing the composition of gouty concretions, concludes his paper\* as follows: "The knowledge of this compound may lead to further trial of the alkalies, which have been observed by Dr. Cullen to be apparently efficacious in preventing the returns of this disease (First Lines, par. 558); and may induce us, when correcting the acidity to which gouty persons are frequently subject, to employ the fixed alkalies, which are either of them capable of dissolving gouty matter, in preference to the earths (termed absorbent), which can have no such beneficial effect."

At p. 614, I have mentioned the grounds on which the use of magnesia has been preferred to the alkalies, as a remedy in *gravel* when the uric acid is supposed to be secreted in excess. The practice has been extended also to the treatment of gout. Mr. Brande, in the paper before quoted (Phil. Trans. 1810), relates the case of a gentleman who had attempted the use of the alkalies with much disagreement to the stomach, and next resorted to magnesia. Having pursued the plan for some time, he was considerably relieved from the appearances of uric acid and mucus in the urine; and the author concludes with stating: "It is also deserving of remark, that there has

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\* Phil. Trans. 1797, p. 337.



not been the slightest symptom of gout from the time of the last attack, which is more than a year back ; a longer interval of ease than this patient has experienced for the last six years."

Doubtless, this favourable report of the effects of magnesia has had a very chief influence in encouraging its habitual employment, by persons subject either to gout or gravel.

On the theory of the operation of alkaline medicine, in cases of a supposed prevalence of uric acid in gravel, I have already very fully offered my sentiments ; and it remains that I should briefly discuss the practical question of the prophylactic powers of this class of remedies with respect to the gout.

A gentleman severely afflicted with gout, informed me, that in the space of two years he took thirteen pounds of subcarbonate of soda, with the hope of successfully preventing the accession of the disease. He was led to the use of this medicine, in part from the urgent feeling of heart-burn and other symptoms of dyspepsia ; and in part from a strong confidence in its prophylactic powers. The result was, that he found a slight palliation of his dyspeptic symptoms ; but his fits of gout were scarcely influenced by this treatment, either as to frequency or degree. When he came under my care, it was evident that he had long suffered from an unhealthy state of liver ; and, being treated accordingly, he received decided benefit, and procured an exemption from gout for an unusual period of time.

In Case X. at p. 334, I have mentioned the temporary advantage obtained from the continued use of magnesia ; and I am in possession of a copious list of cases, in which gouty persons have given to this medicine a full trial, and with a zealous confidence in its powers. So long



as it has acted as a certain purgative, it has proved more or less useful to every patient; and many, in the advantage which they have for a time derived, have begun to hail it as a panacea for all their ills. Others have questioned its good effects, from the uncertainty of its operation on the bowels; some have found it both inert and to disagree; and in no case, in which I have investigated its effects, has it appeared to produce any very permanent improvement, so as to afford the desired exemption from gouty attacks.

From much observation of the effects of this remedy in gout, I have been led to the decided conviction, that its only useful agency has been in its conjoint action as an antacid and a purgative; and that in no other way, than by such influence on the stomach and alimentary canal, can I consider that it has any claims to our regard.

It affords at the best, therefore, in most cases, only a palliative mode of treatment; and sometimes carries with it this serious evil, that the practitioner and the patient may be proceeding with an inefficacious or even hurtful remedy, in a case which is demanding some radical means of medical management, and the best regulations of diet and regimen.

The habitual employment of magnesia is further liable to an objection of considerable importance, which has lately been brought to light. In the *Journal of Science and the Arts*, No. 11, Mr. Everard Brande has related two very striking and instructive cases, in which the long continued use of magnesia was productive of a concretion of this earth with the mucus of the bowels, in an immense quantity; and which, in the case wherein the details are stated, gave rise to many of the worst symptoms attendant on obstruction of the intestinal canal. They

were removed only by active purgatives, which expelled the concreted matter.

This patient has since come under my own care; and I have every reason to believe that an excessive quantity of mucus in the intestinal canal was the occasion of the accumulation in question. It is rather remarkable that the magnesia almost invariably acted as an aperient.

In the second case it is stated, that "not only large quantities of a concretion of a similar description were voided, but, upon examination after death, which took place perhaps six months after any magnesia had been taken, a collection, supposed to be from four to six pounds, was found embedded in the head of the colon, which was of course much distended."

A surgeon of eminence informs me, that he was called to a case of disease in the rectum, which was supposed to be of a cancerous nature, from the pain and difficulty which constantly occurred in the action of the bowel. Upon a careful examination of the state of the rectum, he discovered, much to his astonishment, a mass of hardened matter, which he extracted by means of a spoon, and this proved to be a cement of magnesia and the mucus of the bowel. From this period all unpleasant symptoms disappeared.

The popular use of magnesia, and the rarity of such consequences as are here described, would scarcely seem a sufficient ground of objection to its continued employment as a domestic remedy; but these cases ought to be kept in view by medical practitioners, and the administration of magnesia, unless joined with some more active purgative, should not, in my opinion, be carried on for any continuance.

In my own practice I have established it as a rule,



never to recommend the use of magnesia alone as a constant medicine. I have known many instances in which the daily use of five or six grains of magnesia, with an equal portion of rhubarb, has been very beneficial in prolonging the intervals from gout. Others have succeeded in mitigating the violence of the attack, and some have found the treatment fail. In the successful cases, this simple combination of medicine has acted sufficiently as an aperient, and in this way its utility has been produced. I prefer the following formula of pills, as deserving more reliance in its purgative operation, containing a good preparation of antacid medicine, and being altogether free from the objections which I have attached to the regular use of magnesia.

R̄ Sod. subcarbon. exsicc. 3ss.

Pilul. al. c. myrrh.

Extr. rhei. āā ʒij.

Sapon. dur. gr. x.

Ol. carui gtt. v.      Misce intime et divide in  
pilulas xxiv quarum capiat ii vel iii bis terve in  
septimanâ.

Those persons who suffer from the inconvenience of very sluggish bowels, will find it necessary to make use of a more stimulating kind of aperient. Pills, as prescribed at p. 303; or a combination of the compound extract of colocynth, with half a grain or a grain of ipecacuanha, with Castile soap; or this extract, or the compound aloetic powder, with a small dose of the compound powder of scammony, and gamboge; may be stated as the fit medicines for regular use, and form an ascending scale in strength. It is right to furnish the patient with two kinds of pill for his use throughout the year, so that when



one fails to excite the bowels, he should change to the other, and continue to alternate them as his experience shall direct.

A common opinion prevails, that aloetic medicine is a very improper kind of aperient for those persons who are affected with piles. My observation has convinced me of the error of this opinion; and I affirm, on the contrary, that it may with great propriety be made a principal ingredient in a prescription, provided that the aloës be employed in a pure state. It acts chiefly upon the lower bowel; and for this reason, causing the rectum to be more emptied than happens from less stimulating medicine, it prevents the compression on the blood vessels which a loaded rectum produces; and hence its benefit to those who have piles. Certainly irritation should be prevented, and now and then, I grant, not any of the aloetic preparations will agree. The addition of a grain or two of extract of henbane, either to aloës, or the extract of colocynth, will often prove useful in rendering their action more mild.

The most aggravated instances which I have seen of irritation and inflammation of the hæmorrhoidal tumour being produced by purgative medicine, have been some cases in which the influence of Cheltenham water has been continued too much in quantity, and too long. The mucous membrane of the bowels has thus been irritated, and the piles, in consequence, have become a source of distress.

I am quite persuaded of the great propriety of exciting an increased action of the bowels, one day in every week, however regular the natural habit may be. By such a practice, the accumulation of unhealthy secretions, and repletion in the vessels of the abdominal viscera, causes so directly productive of gout, will be in great measure coun-

teracted. According to the individual constitution, and the degree of tendency to gout, this aid must be given. Some only require such assistance once in the week, while others demand it more or less every night; and certainly, the regular use of an aperient pill, is a much smaller evil than the allowing the bowels to remain in an inactive state.

The compound rhubarb pill of the Edinburgh Pharmacopœia, taken about half an hour before dinner, is adviseable for those who eat heartily, and are inclined to abdominal corpulence, and who have inert bowels.

Every gouty person should make it a rule to establish a free daily action of the bowels once; and I may add, that the majority will profit by inducing this effect both night and morning.

Dr. Whytt relates an instance of the remarkable effects of *lime water* in procuring entire exemption from the returns of gout, which before had been frequent and severe\*.

The patient took it in large quantity, so that its purgative operation was considerable. It is evident from the narration, that the chief effect depended upon its operating in this manner. Sir Gilbert Blane, in making remarks on the effects of the pure fixed alkalies and of lime water, in several complaints, states, in reference to the gout, "that in some cases they seemed to protract the intervals of this disease, while in others my expectations were entirely disappointed." The occasional use of soda water, to an extent that does not produce uneasy distention of the stomach, will be attended with good effects to the gouty, as well as to any other dyspeptic invalid.

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\* Edinburgh Med. and Phys. Ess. vol. iii. p. 359.



In final conclusion of this part of my subject, I have to state, that, in my own experience, I prefer, in the class of alkaline medicines, magnesia either pure or carbonated, and the neutral carbonates of soda and ammonia; but, in the use of the former medicine, I never prescribe it as a separate remedy; and most commonly direct either of the latter articles as one only among other ingredients. Also I join with any of these substances which I may employ, the use of some purgative and alterative medicine, on which I can place a certain dependence; regarding the alkaline agents as useful chiefly from their neutralizing power, and in that manner as being auxiliary to the plan of cure.

It may be useful to observe, that when acidity and flatulence prevail, the calcined magnesia is much to be preferred to the carbonate. Its superior strength I have mentioned at p. 198.

With a view to the prevention of a plethoric state of vessels, and of the consequent introduction of a paroxysm, some have resorted to general bleeding at particular seasons. I have met with instances in which the abstraction of blood for another disorder, in a gouty person, has received the credit, and perhaps deservedly, of remarkably postponing the subsequent attacks. It should be considered, however, that what is good as a remedy, is bad as a habit. The prevention of an excess of blood, by suitable abstinence and exercise, is the only legitimate method of counteracting the plethoric state. On the idea of lessening the quantity of circulating blood in some degree, and of establishing a drain for supposed morbid matter, issues have had their advocates. This treatment appears much too local to act upon the constitution for the prevention of gout. It is a positive and disagreeable inconvenience; and without a clear indi-



cation for its employment, and with different views from those which I have now stated, may justly be superseded by other and less objectionable means.

Upon principles of practice founded on the doctrine of debility, *tonics* have been often employed as a remedy for the prevention of gout.

Of the *Portland powder*, once a favourite, but now an obsolete remedy, little need be said, except in reference to some general reasoning which it suggests. Its composition\* resembled the *annalia medicamina* of Cælius Aurelianus, and other gout antidotes of the ancients. Dr. Heberden spoke of its effects with some approbation. Dr. Cadogan censured it severely; remarking, that “he had observed between fifty and sixty of its advocates, some his patients, some his acquaintance or neighbours, who were apparently cured by it for a little while; but in less than six years time, *omnes ad internecionem cæsi*, they all died to a man†.” A stimulant bitter, such as this, taken for many months in succession in daily doses, would have the effect of exciting the appetite beyond the powers of digestion and healthy assimilation; and hence it might indirectly lead to occasional apoplexy, which it was accused of doing. In the employment of tonics during the interval of the paroxysms, with a view to prevention, we should bear in mind, that the gouty require correction rather than excitement of the digestive organs:

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\* For an interesting essay on the subject, see “An Inquiry into the Origin of the Gout Powder.” By John Clephane, M.D. Med. Obs. and Inqui. vol. i.

† Cadogan on the Gout, &c. p. 79.

and this is to be effected in a regulation of the secretions, and of the action of the bowels, by means of occasional medicine; and by attentive regimen.

I have already spoken of chalybeate tonics under some circumstances of debility; but I am not disposed to admit of their propriety as *prophylactic* in the time of health. A chalybeate water, so useful to the constitution in many cases, is seldom admissible in the gouty habit; in which the vessels are easily stimulated to unhealthy action; and indeed I am well acquainted with some instances, in which this agreeable remedy, resorted to by the patient on the general principles of giving strength to the constitution, has in a short time brought on a gouty attack.

Upon a review of the whole of the present subject, we arrive at this conclusion; that the prevention of gout consists rather in doing little, than much, by the employment of medicine; except as may regard that important object, the due regulation of the bowels; and unless, from the faulty state of the constitution, the use of medicine be really required; in which case, as I have described at p. 624, we may interpose our treatment with such success, that we anticipate and prevent the accustomed return of the paroxysm. I mean therefore to signify by the above remark, that in regard to the gout, the common principle holds good which applies to all other diseases; namely, that the cardinal rules of preserving health are founded on temperance and exercise; on the choice of all those means which are found by the individual to invigorate the system; and the shunning of whatever tends in any way to injure and enfeeble the constitution.





# APPENDIX

OF

## THE EXPERIMENTS ON DIGESTION.

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By the obliging friendship of Sir Astley Cooper, I am enabled to offer his statement of a series of experiments which he performed upon dogs, with a view to ascertain the comparative solvent power of the gastric juice upon different articles of food, and to derive any useful conclusions which they might afford, for the dietetic management of the human stomach, when in a weak state of the digestive power. These experiments were related in the lectures which Sir Astley delivered at the Royal College of Surgeons, about nine years ago ; but they have been published only in this Treatise.

In the conducting of these experiments, every practicable uniformity of method was observed. The substances were cut to a determinate form, and weighed. They were then forced into the animal's throat. A given time having elapsed, the dog was killed ; and the substances not yet dissolved by the action of the gastric juice, being again weighed, their loss, and consequently their degree of *digestibility* as food, under the healthy action of the stomach of the dog\*, was estimated. Raw food, and the lean parts only of meat, were given, except when the contrary is expressed.

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\* Approaching nearly in structure to the stomach of the human subject.

## EXPERIMENT I.

Kind of food.	Form.	Quantity.	Animal killed.	Loss by digestion.
Pork	long and narrow	100 parts	1 hour	10
Mutton	_____	_____	_____	9
Veal	_____	_____	_____	4
Beef	_____	_____	_____	0

## EXPERIMENT II.

Kind of food.	Form.	Quantity.	Animal killed.	Loss by digestion.
Mutton	long and narrow	100 parts	2 hours	46
Beef	_____	_____	_____	34
Veal	_____	_____	_____	31
Pork	_____	_____	_____	20

## EXPERIMENT III.

Kind of food.	Form.	Quantity.	Animal killed.	Loss by digestion.
Pork	long and narrow	100 parts	3 hours	98
Mutton	_____	_____	_____	87
Beef	_____	_____	_____	37
Veal	_____	_____	_____	46

## EXPERIMENT IV.

Kind of food.	Form.	Quantity.	Animal killed.	Loss by digestion.
Pork	long and narrow	100 parts	4 hours	100
Mutton	_____	_____	_____	94
Beef	_____	_____	_____	75
Veal	_____	_____	_____	69

It is probable that the digestion of the dog, with regard to pork, differs from that of the human subject; as

when the human stomach is at all weakened, the order of digestion in these meats appears to be,

1 Mutton	3 Veal
2 Beef	4 Pork

Something also may be attributed to the absence of *fat* in the above experiments; and more especially the fat of pork.

## EXPERIMENT V.

Kind of food.	Form.	Quantity.	Animal killed.	Loss by digestion.
Cheese	square	100 parts	4 hours	76
Mutton	_____	_____	_____	65
Pork	_____	_____	_____	36
Veal	_____	_____	_____	15
Beef	_____	_____	_____	11

## EXPERIMENT VI.

Kind of food.	Form.	Quantity.	Animal killed.	Loss by digestion.
Beef	long and narrow	100 parts	2 hours	0
Rabbits	_____	_____	_____	0
Cod fish	_____	_____	_____	74

Hence it appears that fish is easily digested\*.

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\* In the Edinburgh Medical and Surgical Journal, No. 49, the Reviewer (by whose flattering approbation of my Treatise I cannot be otherwise than much gratified) observes, in commenting on these experiments, that "it may admit of a question, whether quick solution in the stomach be a proof of *easy* digestion." This objection is ingenious, but I conceive not valid; and I am disposed to contend, that, *cæteris paribus*, we



## EXPERIMENT VII.

Kind of food.	Form.	Quantity.	Loss by digestion.
Cheese	long and narrow	100 parts	29
Fat	—————	—————	70

## EXPERIMENT VIII.

To the same dog, beef and a portion of raw potatoe were given, of each, 100 parts.

			Loss by digestion.
Beef	-	-	100
Potatoe	-	-	43

The skin in contact with the potatoe was not acted upon. Under the skin the potatoe was dissolved, but the gastric juice had not reached its centre. Where the skin was separated, it was dissolved.

In the dog, according to the following experiments, roast veal is more difficult of digestion than boiled.

## EXPERIMENT IX.

Kind of food.	Form.	Quantity.	Animal killed.	Loss by digestion.
Roast veal	long and narrow	100 parts	—	7
Boiled ditto	—————	—————	—	30

## EXPERIMENT X.

Kind of food.	Form.	Quantity.	Animal killed.	Loss by digestion.
Roast veal	long and narrow	100 parts	—	2
Boiled ditto	—————	—————	—	31

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are entitled to the inference, that solid articles of food are digestible in the stomach in proportion to their degree of ready solubility. It is true that these experiments relate only to the digestive powers of the dog, and of that animal in health; but they are nevertheless instructive.

The following materials were next the subject of trial.

## EXPERIMENT XI.

Material.	Quantity.	Animal killed.	Loss by digestion.
Muscle	100 parts.	4 hours	36
Skin	————	————	22
Cartilage	————	————	21
Tendon	————	————	6
Bone	————	————	5
Fat	————	————	100

The appearances produced were these:—In the muscle, a separation of the fibres by gradual solution of the connecting media first took place; and afterwards, the fibres themselves became broken down into very minute portions.

The skin, upon its under surface, was broken down; but upon its upper surface, was not altered.

The cartilage was apparently worm-eaten.

The tendon was reduced to a pulpy gelatinous substance.

Further experiment on the digestion of bone.

## EXPERIMENT XII.

	Quantity.	Animal killed.	Loss by digestion.
Thigh bone	100 parts	3 hours	8
Ditto	————	6½ hours	30
Scapula	————	6 hours	100

In the human subject the stomach is capable of acting upon bone; of which fact, the following case is an example.

On Monday the 28th of March, a little girl, nearly four years of age, accidentally swallowed a *domino*, which passed the bowels in rather more than three days. The medical attendant (Mr. Maiden, of Stratford) observing that it was much smaller in size than the other dominos of which it had been one in the set, was induced to weigh it, and found that its weight was only 34 gr. while that of the others was 56 gr.; so that it had lost by digestion 22 gr. Those surfaces of the domino, which, when swallowed, were hollow and blackened as usual, were found prominent like buttons.



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